

EDUCATION OF CHILDREN WITH SPECIAL NEEDS



Distance Education Programme -
Sarva Shiksha Abhiyan (DEP-SSA)
(An IGNOU-MHRD, Govt. of India Project)

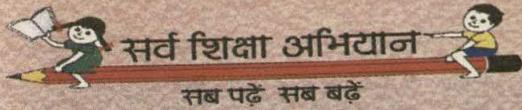
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“गुरु ज्ञान से निकला प्रकाश पुँज़
जीवन के प्रति हमारे दृष्टिकोण
और व्यक्तित्व के विकास की राह
को रोशन करता है।”

— डॉ सर्वपल्ली राधाकृष्णन

“The teacher gives the spark
which will enable you to
develop a new outlook on life
and new kind of being.”

Dr. Sarvapalli RadhaKrishnan



Education of Children with Special Needs-An Aspect of Education For All

Distance Education Programme – Sarva Shiksha Abhiyan (DEP-SSA)
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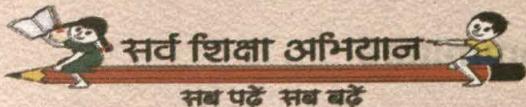
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PREFACE

Sarva Shiksha Abhiyan (SSA) has been launched by Govt. of India for achieving the target of Universalization of Elementary Education and Education for All in a mission mode. One of its objectives is to look into different categories of children who are deprived of Education because of reach. Therefore, Education of Children With Special Needs (CWSN) is an important aspect of SSA for reaching out to the unreached, providing quality elementary education to all irrespective of the creed, caste, colour, category and degree of disability. Under SSA, Govt. of India is committed to providing appropriate and meaningful education to all children in the age group 6-14 years.

Recognizing the diversity of children's needs and abilities is prime requirement for providing useful and relevant education at elementary level. Hence, programmes that are planned to provide education to CWSNs under SSA requires appropriate approach as well as optimum utilization of barrier free environment, effective teacher education and quality monitoring.

As a National Centre of Distance Education, DEP-SSA provides a platform to teachers, BRCCs, CRCCs, teacher educators and other functionaries of SSA to share their experiences, innovations and experiments before experts at the national level.

In view of the importance of CWSN, DEP-SSA organized a three-day National Seminar on "Education of Children with Special Needs: An aspect of Education for All" during December 27-29, 2006 at Hyderabad. The purpose of this seminar was first to know what is being done in different parts of the country in this area and to discuss the socio-economic status of children, with special needs under SSA, the strategies for psycho-social and educational development of children, with special needs, identify needs of CWSNs in regular schools, the specific teacher education programme for the all round development of CWSNs in regular schools, and to discuss the strategies of effective home based programme under SSA. The basic idea was to develop strategies to improve the functioning of inclusive education under SSA. The response of the SSA functionaries was quite encouraging. Thirteen papers were presented in different technical sessions, which have been included in this publication. Most of the papers are of case studies, impact studies and research based. I hope the present publication will be quite informative to all

SSA functionaries who are devoted to achieving the historic target of quality elementary education for all.

I am thankful to the Department of School Education and Literacy, Ministry of Human Resources Development (MHRD), Govt. of India for supporting DEP-SSA activities in order to strengthen and support the state level SSA functionaries.

I would like to express my sincere gratitude to Prof. V.N. Rajasekharan Pillai, Chairman, Advisory Committee DEP-SSA and Vice-Chancellor, IGNOU who provided necessary guidance for the smooth organization of the seminar.

I express my whole hearted thanks to faculty members for the compilation of this document and the supporting staff for the completion of this document within time.

I am also thankful to all the participants who actively participated in the seminar and presented the paper as planned.

Needless to say that this document will be useful to all functionaries associated with Sarva Shiksha Abhiyan with a view to improving the quality of elementary education in the country.



Prof. M.L. Koul
Project Director
DEP-SSA, IGNOU

December, 2007

ABOUT THE BOOK

Distance Education Programme (DEP) aims at providing academic, technical and administrative support to functionaries of Sarva Shiksha Abhiyan (SSA) all over the country with a focus to provide quality elementary education to all children belonging to 6-14 years age. DEP-SSA undertake various activities at national level to provide training to teachers, teacher educators, resource persons and other state and district level functionaries of SSA through Open Distance Learning (ODL) mode. It is national centre which provide a solid base to grassroot level functionaries to present their innovations and share their thoughts and interact with core experts at National, Regional and State level. With this view in mind DEP-SSA, IGNOU organized a national seminar on "Education of Children with Special Needs: An Aspect of Education for All" during December 27-29, 2006 at Osmania University, Hyderabad. Thirteen papers of high quality presented in the three day seminar. The nature of the participants includes teachers, DIET faculty, functionaries of SPO and SCERTs, etc. The themes of the seminar includes, i) current states and comparative profile of children with special needs (CWSNs); ii) possibilities and challenges related to the education of CWSNs; iii) sensitization and involvement of community in the education of CWSNs; iv) framework on curriculum and text-book for CWSNs; and v) teacher education programme for CWSNs. Attempt has been taken under the guidance of Prof. M.L Koul, Project Director, DEP-SSA to bring the proceedings of the seminar in the form of an informative publication for wider dissemination.

The overview of presented papers is divided into three sections. The first section deals with case studies and impact studies on various aspects related to education of CWSNs the second section deals with teacher education programmes and difficulties related to education of CWSNs while the third section presents comprehensive overview of the current status of CWSNs and

A study of the needs of visually impaired children in integrated setting

This Paper was presented by Ms. Upasana Ray. The paper identifies/discusses the need and requirement of visually impaired children for successful integration in regular schools with regard to curricular and cocurricular aspects. Researchers reflect the importance of positive peer group support through early age intervention and encouragement of teachers, societal acceptability towards visually impaired.

Preparation of innovative readiness kit for mentally retarded children

This paper was presented by E.J. Sooda Beevi. This paper focussed on the education of children with mentally retardation and showed significant gain in social and academic skills in inclusive environment. The researcher has made an attempt to develop an innovative readiness kit for mentally retarded children and emphasises on attitudes of the teachers as well as parents towards a collective group of disabled and non-disabled. Emphasis is also laid on in-service courses for preparation of readiness kit and its use in classroom situation.

Effectiveness of Peer Group Interaction in enhancing achievement level of Children with Special Needs

This paper was presented by Shri. C. Karuppaiyan. This paper helps in developing strategies to enhance the level of achievement of children through effective peer group interaction. This is an attempt to improve the level of achievement of children in Science at Primary Grade for providing meaningful and quality education. It provides a strategy for remedial teaching to children with Special Needs and Slow Learners.

Section II

There are two papers related to teacher education programme and development of manpower for the education of children with special needs.

Schematic Sketch for the Challenges and Suggestions for the Education of Children with Special Needs

This paper was presented by Ms. V. Mrunalini. This paper tried to develop the attention of all stakeholders to solve practical difficulties related to education of children with special needs. The author highlighted on the strength and weakness of the present system to realize the goal of education for all. In our country, there is the need to improve manpower to deal with the education of children with special need in regular school. Hence, we must focus on the need for the preparation of teachers along new dimensions and modification of the objectives of in-service teacher education programme in a constructive way for the sake of achieving the target of education for all.

Teacher Education Programme for the Children with Special Needs An experiment for Blind Teachers

This paper was presented by Shri Prasanna Mukherjee. Through this paper an attempt was made to discuss various aspects of teacher education programme related to education of children with special needs in India. In-service teacher training is considered to be the best support for the professional development of teachers. Quality of Education in regular schools need to be improved to accommodate children with special needs. Hence, in this regard it is the teachers, the community and parents who need to develop effective strategies for increasing enrolment and developing classroom transaction in a positive spirit.

Section III

There are two papers which gives a comprehensive scenario of international commitments and national initiative for the education of CWSNs and current profile of CWSNs under SSA in our country.

Education of Children with Special Needs under SSA A Challenge

This paper was presented by Dr. M.K. Dash. This paper discussed the national and international commitments towards education of children with special needs as well as status of children with special needs in India under SSA. This paper highlighted the role of teachers, parents and community to make inclusion go beyond tokenism into reality. In India, inclusive education is not an option but compulsion to reach out. Inclusion of children with Special Needs is back in terms of psycho-social development as well as academic and vocational development for education and rehabilitation of children with special needs. The major aspect of this paper is to throw light on National Level initiatives taken so far for the education of children with special needs and to offer a critical discussion on various aspects to develop inclusive ethos in normal schools.

Education of Children with Special Needs Policies and Practice A Statistical Analysis

This paper was presented by Shri K. Ramu. This paper presented the demographic status of education of children with Special Needs and availability of services for them in our country. The major focus of this paper was on a comparative study of the growth pattern of education of CWSN in an inclusive environment, with an objective to mould the existing practices to a better shape so as to achieve the target of the education of CWSN in the Indian context.

Conclusion

The content of thirteen papers which become a part of this important informative document will be useful to bring a change in perception of parents, community, teachers, teacher educators and other functionaries of SSA toward quality education of children with special needs. It is an important step to bring change and educational scenario for providing quality elementary education to all.

Manoj Kumar Dash.

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POSSIBILITIES AND CHALLENGES IN INCLUSIVE EDUCATION OF CHILDREN WITH HEARING IMPAIRMENT - A CASE STUDY

*Ajay Kumar Mahapatra and Swarnalata Panda**

Abstract

Little has been done in the area of research in Inclusive Education for Children with hearing impairment in India. Therefore, the present paper is an effort to highlight the possibilities and challenges in the area of inclusive education for children with hearing impairment through a case study. The researchers describe their direct experience with a child who happened to have pre-lingual severe hearing impairment since its birth. The case description intends to broaden the perceptions and make realization towards possible strategies for successful inclusion of children with hearing impairment. To confirm the objectives determined in the present paper, it encompasses a detail description of strategies such as beginning with an early diagnosis, fitment of appropriate hearing aids, positive and realistic acceptance by parents, providing a stimulating spoken language learning environment, enrolment into nursery education and continuity in regular school, which show the result in different aspects like communication, language and speech; academic performance and social adaptive behavior of the present case. To conclude, the study highlights its positive relevance to inclusive education.

INTRODUCTION

Normal-Hearing children, who are not with severe intellectual impairment or children with orthopedic impairment, have always been placed into a regular classroom with their peers, irrespective of their family background, speech defects, emotional maturity and other factors, must succeed or struggle through to the next grade. Yet few children with hearing impairment to be educated with normal-hearing children in their neighborhood schools. Instead, these systems have insisted upon placement in special schools. If there are no local facilities, then parents have been expected to enroll their children with hearing impairment in state residential special schools where most of the year is spent among peers with similar such impairment, and where manual language is the primary mode of communication.

* R. C. AYNIHH
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A trend towards a significant change in the provision of educational services for children with disabilities including children with hearing impairment occurred during past few decades. A feeling began to emerge that perhaps the regular classroom would be the best place for children with disabilities in order to broaden their intellectual, emotional, educational, social & vocational horizons. In this regard, "Lilly's (1971) ZERO REJECT model of mainstreaming proposes that exceptional child should be taught primarily by regular school teacher. Once the child is in the mainstream, Lilly believes, it should be impossible to remove the child to a special school. The role of special educators in such a model is to train the regular educators to deal with the problems of exceptional children within the regular class." In India, the National Policy on Education (1986) & the Program Of Action (1986 & modified-1992) emphasized on direct integration of children with mild to moderate impairment to regular schools. The concepts of Universalisation of Elementary Education (UEE) and Education For All (EFA) which have been univocal, had not put children with various impairment aside. But in practice, interpretation of these concepts with regard to education of children with different impairments was differently understood.

CLARIFICATION

The term **inclusion** is of recent origin in its conception in India. It has shifted the focus from the child with impairment to the school-community. As defined by IDEA-the Individuals with Disabilities Education Act & its (1997) amendments, "Inclusive Education means all students in a school regardless of their strengths and weaknesses in any area become part of the school community. The 1997 amendments also make it clear that schools have a duty to educate children with disabilities in general education classrooms." PWD Act (1995) in its Chapter-V-Education-Clause-26(a) & (b) emphasized access to free education in an appropriate environment and promotion of inclusion in normal schools for children with disabilities.

Hearing impairment ranges from mild to profound loss of hearing in terms of severity and pre and post-lingual in terms of language acquisition. For successful inclusion of children with hearing impairment, Reichenstein in Israel (1978) concludes with four point program of early intervention: *early start, early binaural amplification, parental guidance and involvement and integrated preschool education.*

The present paper "**Possibilities and Challenges in Inclusive Education of Children with hearing impairment: A Case Study**" discusses inclusion of a girl with severe hearing impairment who has crossed over to the state of achieving her goal of life on her own as most other hearing children do.

OBJECTIVES

- To discuss the psycho-social perception of hearing community towards hearing impairment,

- To discuss the importance of hearing and stimulating spoken language environment,
- To analyze the academic success of the present case,
- To discuss the approaches for effective inclusion and
- To discuss the relevance of the study to inclusive education.

PRESENT STATUS

The researchers now introduce Ms. Priyanka Mohanty aged 22 yrs having pre-lingual bi-lateral severe sensory-neural hearing loss identified at the age of two years. She was referred by S.C.B. Medical College & Hospital, Cuttack to AYJNIIH, Mumbai for audio logic assessment where she was confirmed to have bilateral severe sensory-neural hearing loss. The details about her hearing loss are given hereunder.

Frequency	250Hz	500 Hz	1000 Hz	2000 Hz	4000 Hz	8000 Hz	Unaided
Right ear	60 dB	70 dB	75 dB	80 dB	80 dB	85 dB	PTA 75 dB
Left Ear	60 dB	65 dB	70 dB	75 dB	80 dB	80 dB	70 dB

She was fitted with a pseudo-binaural pocket hearing aid model - Elkon BM-78 with AP-180 receivers immediately after diagnosis. Now she is using binaural Behind The Ear (BTE) Alps Supreme model. Priyanka's IQ is average.

She is studying now in the 12th Std. (Commerce) at St. Luis Institute for the Deaf, Chennai. Her medium of instruction is English. She can understand and speak three languages - Oriya, English & Hindi. She can read English very fluently and Oriya fairly well. She can write English only. In addition, she has also acquired Indian Sign Language (ISL), which she had never been exposed to till she was 20 years old. She uses spoken language fluently with her parents, siblings, hearing peers and other hearing members of the community. But while interacting with the deaf community, she uses sign language (ISL). She proves herself to be unique by interacting over telephone both on landline and on cell phone. She uses internet to chat with her friends and relations.

PAST HISTORY

The past history of the case indicates that she got hearing loss since birth. But interventions were started at the age of two years. After audio logic assessment, Priyanka's parents had had informal guidance program. With positive and realistic perception towards their kid's condition of hearing loss, they were determined to face the challenge. They brought up Priyanka as they would do with their younger daughter, Guddy. They were in regular contact with professionals. They exposed Priyanka to spoken language and hearing environment and enrolled her in Ruchika Nursery School, a Public School in Bhubaneswar for integrated pre-school education. She was happy with her classmates and received education through general curriculum in

the subsequent years and completed 7th Standard in that regular school. Her psycho-social adaptability was normal till she completed 7th Standard of schooling. She was not doing well in most of the academic subjects. Therefore, her parents searched for an alternative system. National Institute of Open Schooling, an alternative adopting open education system provided her the opportunity to complete 10th Std education. Since she could not obtain any high academic record, she did not enter into a regular higher secondary school for further education. This left her with the only option to have higher education in a special set up for the deaf.

STRATEGIES

Parents had shown a positive and realistic attitude towards Priyanka. They accepted the binaural hearing aids as part of her dressing. They never taught her to speech read. These helped in developing hearing perception and integrating hearing into her total personality.

Teachers at the regular school were providing a normal learning environment using the same techniques of teaching which were commonly used for all others. Parents sought guidance informally. They were interacting with her as they would have done had she been a hearing child.

CASE DESCRIPTIONS

Communication, Language and Speech

She relies on hearing as the primary mode of reception and her speech is intelligible as compared to the hearing children's speech. She interacts with others through spoken language always and now prefers to interact with hearing people in spoken language and through sign language with her deaf counterparts.

Academic Performance

She performs fairly well in all academic subjects, achieving an average academic performance within the range of 35 % to 45%, which is not significant. Abstract reasoning in a subject like mathematics is low but oral reading and writing is natural and intelligible. At higher secondary level she preferred to continue with subjects related to commerce.

Social Adaptive Behavior

Priyanka's self-concept was average during her pre-adolescence period but as she grew older, she developed low self-concept. Her interpersonal relationship is good and positive. Social maturity is adequate and age-appropriate. With her great qualities, she adapts herself with hearing as well as non-hearing community. She likes to attend all social and cultural functions. Sometimes she takes her own decision. During informal discussions with her parents regarding studies of Priyanka, the researcher (one of her home tutors) revealed that she did not like punishment for not doing any home tasks given by a tutor and that might be the reason of her rejecting as many as six home tutors during nursery to 3rd Standard of education.

Significant Achievement

The case (Priyanka) enjoys listening to music, audio cassettes and walkman, even receives calls on telephones and cell phones. Added with these, she is an Oddisi dancer. Self- learning habit is another significant achievement of her life. She has also completed computer education from VRCH.

SUCCESS

Priyanka - *"I was securing 2nd - 3rd rank among seven deaf classmates in my 11th Std. But now I am at 4th rank .Still I am happy with my endeavor. My friends should go ahead."*

Parents - *"We achieved a lot worth our own effort. We are grateful to the Rehabilitation Sciences."*

Ex-teacher- *"Priyanka's achievement inspired us to realize the concept of INCLUSION"*

The researcher- *"She is excellent in her social behavior. She is a unique example."*

FAILURE

Her abstract reasoning is low; not at par with her age due to lack of strong academic support at elementary school.

RELEVANCE TO INCLUSIVE EDUCATION

Early identification and intervention, continuous and optimum use of amplification, positive acceptance of parents and community, continuous spoken language interaction, early enrolment in regular nursery school and continuity in regular formal schooling both as the real sources of normal learning environment, Peer acceptance, Availing the opportunity of Alternative System of Education - NIOS and Competing with the State Syllabus of Studies at higher secondary level – all of which Priyanka went through, helped her achieve an optimum level in most aspects of life. This indicates that there is full possibility of inclusion of children with hearing impairment in regular schools. And of course, it is challenging.

REFERENCES

- Hallahan Daniel. P.: *Exceptional Children: an Introduction to Special Education*,
- Kauffman. K. James: *Prentice Hall Inc, New Jersey, (1978) P-43*
- Ling Daniel.: *Early Intervention for the Hearing Impaired Children: Oral Options, A College Hill Publication, Boston (1984) p-182.*

- Pollack Doreen: *Educational Audiology for the Limited Hearing Infant and Preschooler, 2nd edition, (1985).*
- MHRD, Govt. of India: *National Policy on Education & Program of Action, (1986 & Revised 1992).*
- Northcott H. Winifred: *The Hearing Impaired Child in a Regular Classroom, Alexander Graham Bell Association for the Deaf, Inc, (1980).*

CASE STUDY OF A CHILD WITH LEARNING DISABILITY

*Dr. Tilotama Senapati and Sh. Gowri Shankar Mishra**

Abstract

The term case study has a number of meanings, some of which are quite specialized when applied to different disciplines such as law, business, Medical and education. Following the success of case study method in above disciplines, it has been extensively used in teacher Education, (Soulman, 1992). In the past two decades it has been tried in Elementary and Secondary Schools. Case study refers to study of situation- an analysis of a particular case or situation used as a basis for drawing conclusions in similar situations.

INTRODUCTION

The case study gathers data about the present status, past experiences and other factors that explain how these factors influence change or growth. The study aims to find out the behavioral characteristics of different kinds of individuals, in the context of children with special needs. Case study has a prominent role to play. Studies conducted in the past using case study approach has brought many new things to the lime light about a person, or a group of persons of a unit, which has helped others in the field of research. Case studies of disabled children reading in Govt. Primary and Upper Primary Schools focus a flood of light on the activities and achievement which can be helpful from different angles to the improvement of the other learners. With this aim the researchers decided to conduct a case study on a child with learning disabilities. SSA aims at mainstreaming all the out of school children, retention of children in the school, reducing the drop out rate and provide qualitatively rich elementary education. Sometimes it is seen that the children with learning disability leave the school before completion of the elementary cycle.

SOURCE

As resource personnel under SSA intervention and as researchers of child psychology the investigator and the co-investigator provide regular academic support to the teachers who deal with the learners at the grass roots level. The teachers always discuss the learners who are not only repeaters but also very poor in reading and writing. They also exhibit very poor performance in numerical calculation. The investigator was interested to interview the child with learning disability. In order to conduct a case study of the child, the researchers discussed with the teachers who are familiar with the child and they collected relevant data in connection with the child

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who is learning disabled and decided to relate the various activities of the child with learning disability.

Objectives

- To examine the nature of learning disability of the child.
- To collect the profile of the child pertaining to his family and academic performance.
- To relate the facts which are responsible for his learning disability.
- To suggest measures to overcome learning disability.

ABOUT LEARNING DISABILITY (L.D.)

Learning Disability (LD) is a disaster that affects the student's ability either to interpret what they see and hear or to link information from different parts of the brain despite an average or above average intellectual capacity. These limitations can show up in many ways e.g. as specific difficulties with spoken and written language coordination, self control or attention. Such difficulties extend to school work and can impede the process of learning to read or write or to do arithmetic.

In order to ascertain the learning difficulties of the children a number of children reading in Netajee Primary school of Khallikote Block in Ganjam district of Orissa were administered a test in the following subject and content areas.

Mathematics

- Writing three digit numbers in words and figures.
- Addition with carrying over digits.
- Subtraction with borrowing.
- Concept of zero.
- Putting symbols in a solved question.

Language

- Reading words with sound symbol association.
- Comprehend a paragraph giving reply to wh-questions.
- Write sentences with space between words.
- Using comma and full stop.
- Verification of answer papers and daily written assignments of the children

Out of four children tested, one child named Saroj Roul was identified as a valid LD.

Common Errors noticed

Sl. No	Subject	Errors	Example
1	Mathematics	Does not attempt	Write the numbers in word-75, 45, 109, 89
2		Forgets symbols to put	11plus 5 subtraction 6=1156
3		Can't carry digits in multiplication	$27 \times 4 = 228$
4		Doesn't know the place Value	Place value of 1 in 125=1
5		Doesn't borrow digits in Subtraction	$61-9=68$
Sl. No	Subject	Errors	Example
1	Language	Pronounces word wrongly	Reads school as "ecool". Reads cuckoo as 'cook'
2		Could not comprehend the passage	After listening a story fails to respond to wh-type of questions.
3		Couldn't locate a specific information in a passage given	He didn't find out the name of a scientist that a passage contained.
4		Couldn't give space between two words	He wrote "inthemorning"
5		Couldn't arrange letters to make a meaningful Word	'bdrige', 'stele'

From the above findings the researchers were sure of the learning disability of the learner.

Profile of the child

Name	Date of birth	Name of father/ Mother	No of brothers and sisters	Hobby	Occupation of the mother	Qualification of mother
Saroj Kumar Roul	29/05/97	Father:- expired Mother- Sanjukta Roul	One sister	Playing Games	Stitching flower garlands to sell in out side of temples	7 th pass

Attendance of the child

Month	No. of working days	No. of days attended
June	15	10
July	23	20
August	23	21
September	21	09
October	17	11
November	24	19

Results of Annual Examination

Class	Marks obtained							
	Language (100)		Maths (100)		Science (100)		S. Studies (100)	
	Written	Oral	Written	Oral	Written	Oral	Written	Oral
III	11	20	20	10	14	12	23	06
IV	16	06	07	14	15	18	15	16

Remarks of his class teacher

He is very poor in mathematics. He doesn't show his answer notes regularly for correction. He makes spelling errors. He leaves the class of his own accord. Sometimes he is marked to be absentminded. But, he carries out orders as soon as he is asked for.

Statements of his Mother

He is a late riser. He doesn't focus his mind on studies. He is fond of games and sports. Sometimes he comes to school before the last bell of the school. In fear of incomplete homework, he avoids attending class. He likes to watch TV of the neighbours'. Some times complaints were heard about him.

FINDINGS

- 1) He is not regular in classes.
- 2) He has poor knowledge in Math and language.
- 3) He is not doing any thing systematically
- 4) He is not at all study minded.
- 5) His hours of study beyond school hours are too limited.
- 6) He is dependent on his mother's care as his father is dead.

- 7) Doing home task is not satisfactory and regular.
- 8) Correction work is also neglected.
- 9) His learning difficulties were never admitted.
- 10) His mother is not at all aware of his low performance.

IMPLICATION

The language difficulties can be removed through speech training and pronunciation drill. The poor writing skill can be developed by regular dictation. Punctuation skill can be developed by giving him copying exercises and thereby helped in overcoming his difficulty. With regard to mathematics, regular practice work can be given to him in the class allowing him to sit with the high achievers to avail peer guidance learning.

It was revealed that he doesn't write even a page everyday on verification of his notebooks. So, task completion should be checked for ensuring regularization. During group work his active involvement should be watched through individual attention.

CONCLUSION

A number of children might be suffering from such type of difficulties which are left unattended. Hence, it is aptly regarded that Learning disability can be eliminated by the collaborative effort of the teacher, peers and parents and relatives which is found in this case study.

REFERENCES

- Wall, K. (2004) Special Needs and Early Years, A Practitioner's Guide, Sage Publications, India
- Handbook on Inclusive Education(2006),Published by DEP-SSA, IGNOU, New Delhi.

HOMEBASED TRAINING PROGRAMME FOR CHILDREN WITH MULTIPLE HANDICAPS

Mrs. K. Shanthalakshmi and Ms. Maya Annie Elias***

INTRODUCTION

During the past four to five decades, trials have been made to standardize and universalize inclusive education with very little achievement. There are a good number of children in formal school falling in different categories of disabilities. These include children with hearing impairment, mental retardation, autism etc. These categories of children need special attention and the existing curriculum has to be modified suiting the needs of these children. Though many of them are capable of being benefited by appropriate training and education, they are unable to get the desired training in normal institutions due to numerous constraints. The training and rehabilitation of these children are mainly guided by unequipped parents. Only a few organizations undertake the training and rehabilitation of these children and we have been able to touch only the very fringe of the problem. The activities to uplift such children are mostly confined to the urban areas. The children belonging to the rural areas are totally neglected. In order to enable them to cultivate a sense of self reliance and to overcome dependence, it is absolutely necessary that a comprehensive educational programme be prepared and implemented at the earliest. In the present setup, there is no standard programme, which satisfies all the categories of the disabled. To develop skills of these children in different areas of functioning, an integrated training programme is a must. In order to achieve **INCLUSIVE EDUCATION**, the entry level of the learner must be investigated. On application of the programme, the instructor will be able to categorize the degree of achievement in that particular child. The present educational system must be aimed at assimilating these slow learners into the community (rehabilitation). The educational goals must be such that it increases the ability of the learner to function with the "normal" children. In practical dealings, the learner requires a Combination of related abilities.

AIM OF THE STUDY

To carry out home based training programme for children with multiple handicaps to develop various skills.

OBJECTIVES OF THE STUDY

- To assess the skills of the children in different areas of functioning
- To adopt different effective teaching methods suiting the needs of the children. This includes mobility training, neck control, play skills, toilet training, speech and language development, eating skills etc.
- To train the primary caregivers to carry out the children's training.

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- To evaluate the effectiveness of the training programme

The Primary goal of the present study was to determine the current level of functioning of the children and enable them to utilize the maximum potential and to minimize the degree of disability.

The investigator consulted various experts in the field. Specific inputs were taken from the professionals in the departments of mental health, speech and hearing, physiotherapy, health and nutrition, dentistry, pediatrics, plastic surgery etc. The researcher also took a review of the studies conducted in the related area before finalizing the design of intervention.

METHODOLOGY

5 Children with multiple handicaps were selected for the study. These children were referred by different professionals in the field.

Before planning the intervention, an assessment was done by the researcher to find out the children's level of functioning. The assessment included a physiotherapy evaluation, assessment of overall development and a behavioral assessment. The child's specific problems were assessed on a five point scale. (1=very poor, 2=poor, 3=moderate, 4=good, 5=very good)

PROFILE OF THE PARTICIPANTS

The participants belonged to the age group of 5 to 9 years. Four of them were boys. four of them were from urban background, two of them belonged to lower income category and three of them were from nuclear families. All the participants in this group had problems with mobility and speech, and were not toilet trained. In general, they lacked most of the independent living skills. All of them had multiple disabilities and also suffered from other general medical conditions such as epilepsy.

INTERVENTION

Home-based intervention was planned for these children as they could not attend institutions because of their level of disability. Intervention was carried out over a period of one year. Specific goals were set for each child based on the assessment done. At least 3 sessions were conducted per week. The training period was made flexible to meet the needs of the families.

CASE STUDIES OF GOAL ORIENTED HOME BASED PROGRAMME

1. PRAVEEN:

PROBLEMS IN THE CHILD

- Difficulty in using the toilet

- Mobility problems- not able to walk
- Hyperactivity
- Drooling of saliva, unable to eat independently
- Speech problems- could not speak at all, would communicate through cry

Goals

1. To make him walk
2. Reduce hyperactivity
3. Develop awareness of the environment
4. Teach to play by himself
5. Toilet training

Time Limit - 1 Year

Time Taken To Attain The Goals 9 Months

Intervention

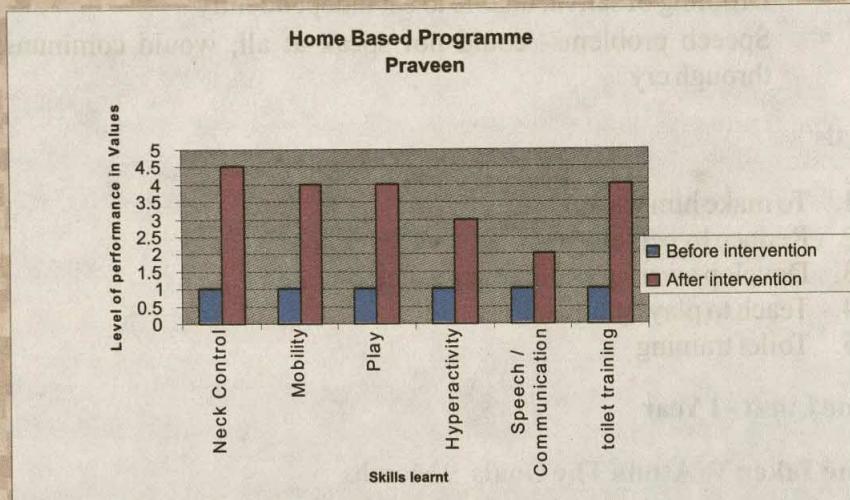
- Doctor's evaluation, pediatrician and special teacher
- Behaviour modification
- Rectifying eating habits, denture rectification

The child used to cling to the mother, and was hyperactive. Reward and punishment were used to reduce his clinging behavior. Physiotherapy was done regularly to develop motor skills. Multi sensory stimulating toys were used to develop his play skills. Physiotherapy also helped in controlling drooling of saliva and the boy was trained in eating skills by modifying eating habits.

Improvements

- **Mobility**- able to move with help, to grasp things/toys, climb stairs, walk by holding hands, and does not cling to others. But still needs help or support to walk in an open area/field.
- **Toilet training** independently uses the toilet but needs to be cleaned
- **Speech**- only sounds could be increased but crawls to reach the objects.
- **Drooling**-only when excited
- **Play**- learnt to open and close even small boxes and plays with small toys. If any calamity is created by himself, or if stuck up with unfamiliar objects he now intelligently crawls and waits for help.
- **Environment**- he has become aware of handling different environments

Graphical representation of performance



2 .YESH:

PROBLEMS WITH THE CHILD

- No mobility
- No speech
- Lack of toilet training
- No trunk control
- Swallowing problem

Goal- to make him sit by himself and to eat and drink, develop speech and mobility

Time Allotted – 2 months

Time Taken – 23 days

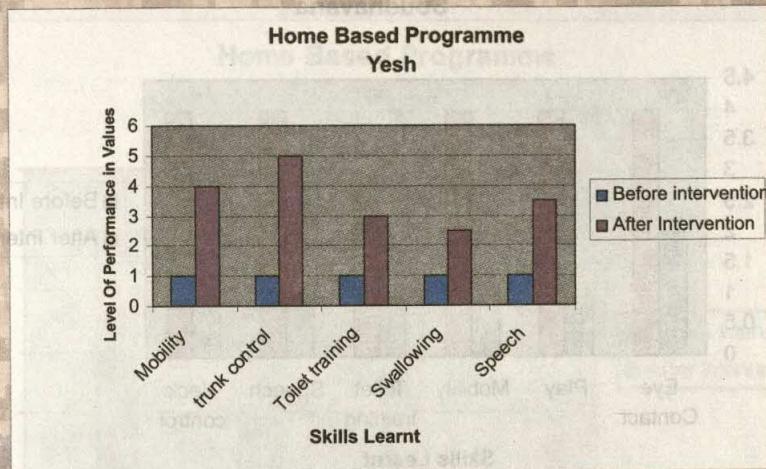
Interventions

- Pediatrician and physiotherapist's evaluation
- Posture rectification with available household materials
- Toilet training
- Physiotherapy

Improvement

- Mobility – able to move to the sides, volunteers to lift his hands when stimulated, gets motivated to do things by himself
- Drinking and eating in sitting posture
- Toilet training-well trained to use the toilet
- Speech-only sounds are heard, intelligently tap or make sounds to express his needs
- Swallowing – able to swallow due to posture rectification

Graphical representation of child's performance



3. SOUDHAVANA

PROBLEMS WITH THE CHILD

- Neck control
- Mobility
- Speech
- No play
- Eye contact

Goal- to gain neck control, make him sit, develop eye contact, improve speech, toilet training.

Time Limit – 1 year

Time Taken – 1 year and 2 months

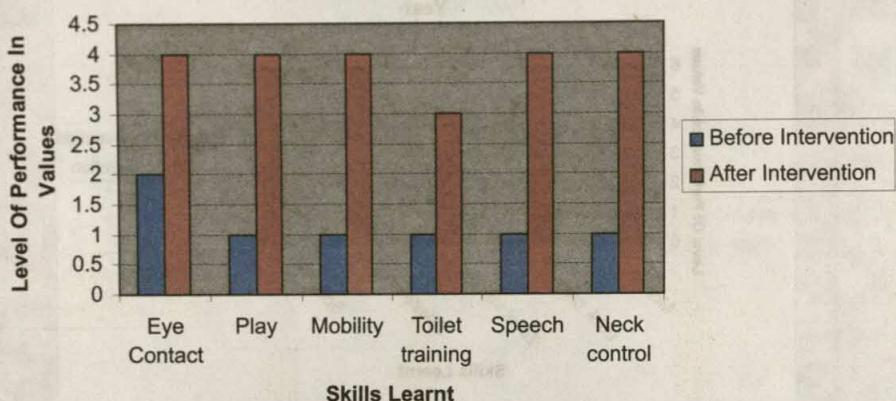
Intervention

- Doctor's evaluation, pediatrician and physiotherapist for posture rectification and neck control.

Improvements

- Mobility was able to move by crawling
- Sitting posture partly achieved with support
- Toilet training was able to use the toilet
- Speech- only sounds and cries could be produced
- Play activities responded very well after a lot of physical activities and eye stimulation exercises.
- Started social interactions

**Home Based Programme
Soudhavana**



4. MONICA:

PROBLEMS IN THE CHILD-

- Head control
- Eye problem
- Hearing loss
- Epilepsy
- No comprehension of speech, no expression through speech and gesture

Goal-To gain neck control, to make her walk, develop speech

Time Limit- 1 year

Time Taken To Achieve The Goal- 9 months

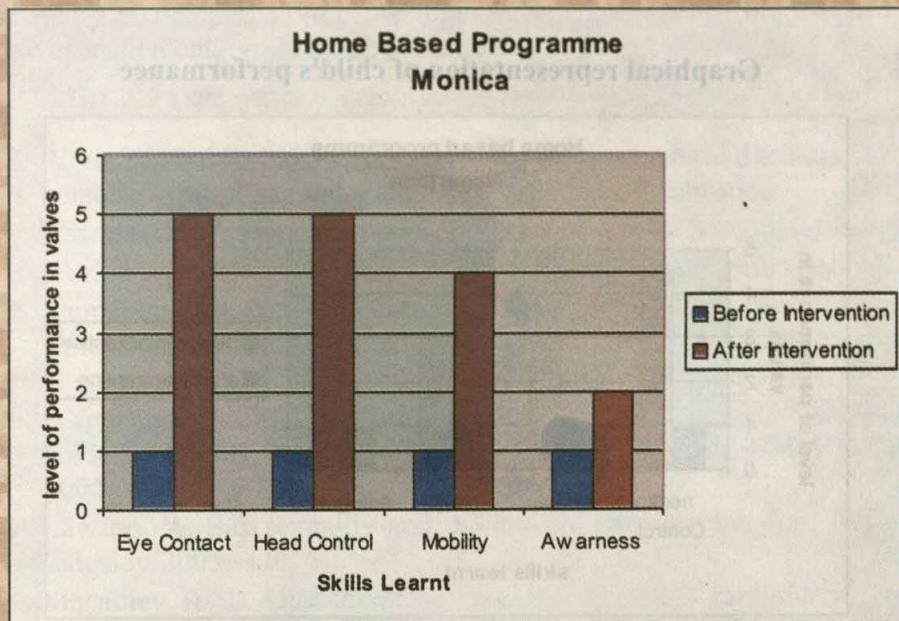
Intervention

Physiotherapy for neck control, speech therapy, stimulation exercises for eyes, medicines for epilepsy

Improvement

- Head control- was achieved by the 6th month
- Mobility- the child could walk by 9th month
- Eye contact- she could develop eye contact to certain stimuli

Graphical representation of child's performance



5. NAGARJUNA

HOME BASED TRAINING - GOAL ORIENTED PROGRAMME

PROBLEMS IN THE CHILD

- No neck control, the child was not able to sleep on his back, or drink or swallow
- No communication skills, no language development at all. No eye contact present

Goal: to develop eating skills, and to help him gain mobility, make him sleep lying on his back

Time Limit: 1 year

Time Taken To Achieve the Goal: 1 year two months

Intervention

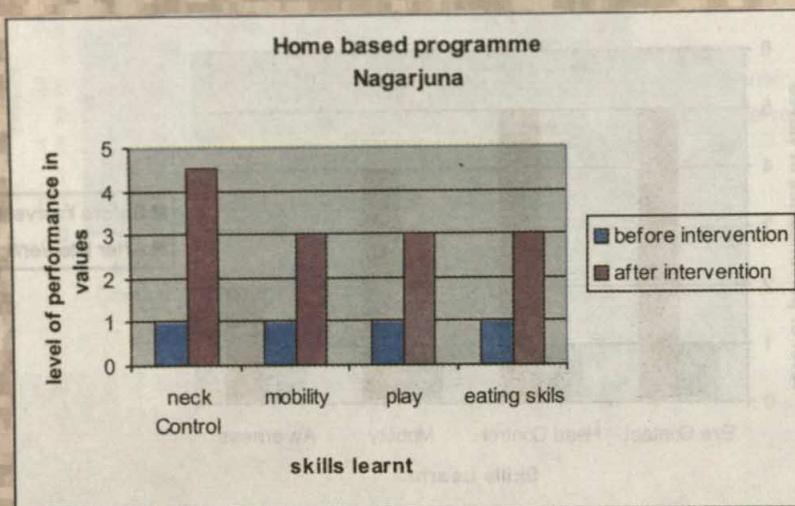
Physiotherapy, multi sensory training, speech therapy, eye stimulation exercises

Improvement

- Head control was achieved after one year two months (with support)
- After the intervention, the child was able to communicate by gestures, indicate his needs

- Eye contact was developed partially

Graphical representation of child's performance



The participants in the home based programme had multiple disabilities and had many problems in common such as mobility, speech, lack of toilet training, neck control, drooling, poor eating skills and fits. After intervention they improved in most of these areas. Since they belong to a younger age group, persistent training would help them to improve further.

DISCUSSION

Study results indicate that the needs of each child are different and the intervention has to be focused and individualized addressing specific issues of each of them. It is very important to have a tailor made intervention programme for each child. A uniform method of evaluation and intervention might be helpful in improving certain skills, but for the intervention to be effective it is very important that each child's special needs are taken into consideration.

The children with multiple handicaps are not able to attend the institutions run for the disabled due to a variety of reasons. Some of them are the severity of the disability, the socio economic background of the family, lack of transport facility, ignorance of parents etc. Hence it is very important that the training is provided at their home environment. This type of training would also ensure equal participation and involvement of the family members.

SUGGESTION/CONCLUSION

Most of the time, the needs of the children with multiple handicaps are neglected. Our training programmes mainly focus on the children who attend institutions/ special schools. The current study indicates that if the training is given consistently, it is possible to train children with multiple disabilities and they will learn according to their ability. So the suggestion from the researcher is that various training institutions can have their own new systems of training programmes for specially challenged children.

Special type of training method addressing the needs of home bound children with multiple disabilities is the need of the day / hour to help the specially challenged to join the main stream and to turn the dream of universal elementary education come true.

REFERENCES

- Ritvo Edward R. Inpatient program for the diagnosis and treatment of persons with autism and related developmental disabilities
- Khwaja Ali. "You too can reach out": a handbook for lay counsellors.
- World Program of action concerning disabled persons. United Nations.
- Rappaport Lisa and Schulz Morris Linda. Creative play activities for children with disabilities: a resource book for teachers and parents. Human kinetics books, Illinois, 1989.
- S.Venkatesan. Children with developmental disabilities: a training guide for parents, teachers and caregivers. Sage publication New Delhi, 2004.
- Lawson. W. Sex sexuality and the autism spectrum London, Jessica kingsley, 2005.
- Mccauley R .J. Assessment of language disorders in children, N.J Lawrence Eribaum 2001.
- Arendt Lusia L. Living and working with autism, National autistic society, London.
- Brown Wendy. Practical guidance for those who work with autistic children. National autistic society, London.
- Schreibman Laura. Autism. Sage publication, New Delhi, 1988.
- The special curricular needs of autistic children. The association of head teachers of autistic children and adults, London.
- Hurlock Elizabeth B., Child Development. Tata Mcgraw hill publishing company limited, Delhi.
- Doman, Doman and Hagy. How to teach your baby to be physically superb, Abery publishing group, New York.

STATUS OF INCLUSIVE EDUCATION IN THE DISTRICT OF JALNA

A CRITICAL STUDY

Dr. Sudhakar B.GAIKWAD¹

Abstract

Education for All and All for Education is the motto of our Educational system. Identification of CWSN is a very critical Task because there are various disabilities with various symptoms and trained professionals in the field of disability are scarce. This study had been undertaken in Jalna District of Maharashtra. The objectives were to identify CWSN through PHC medical screening camp and to provide support service to CWSN. Survey method is used for study and data is collected through screening checklists, which was distributed to each school in the district. The present study indicates the progress and achievement of inclusive education in the district of Jalna and also shows ways as to how to get the medical benefits for various disabled children through surgery. It is shown that identification of children for various medical treatment and their educational placement through appropriate treatment including surgery (where necessary) are shown as viable and feasible possibilities.

INTRODUCTION

Inclusive Education is one of the important intervention under SSA. Through the intervention of IED programme, the needy children are to be identified and their rights of education like other normal children are to be ensured so as to make them socially independent to survive. In IED programme, the identification of CWSN is a very critical task because there are various disabilities with various symptoms including the CWSN is difficult due to lack of professionals in the field of disability. Local resources i.e. Civil hospital, NGOs provide aids and appliances to the CWSN, mechanics & other resource persons.

There are various types of disabilities like Orthopedically handicapped, Visually handicapped, Hearing handicapped, Learning disability, Mental retardation, Multiple disability etc. Thus, DRC (SSA) Jalna has taken initiative to identify CWSN in the district and to strive for their fundamental educational rights. For the identification of CWSN, SSA made a plan for each primary teacher. The teacher was used to identify CWSN easily with the help of a screening checklist.

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NEED OF THE STUDY

This study will be helpful to know the status of Inclusive education in the Jalna district and to know the steps to take for denufication of CWSN.

OBJECTIVES

1. To arrange the workshop, DRG meeting on BRC, CRC level reg. Identification of CWSN
2. To Identify CWSN through PHC Medical Screening Camp
3. To identify CWSN through civil surgeon for further treatment
4. To provide support service to CWSN

SCOPE & LIMITATIONS

Investigator has limited the study to eight blocks of Jalna district. i.e. Jalna, Badnapur, Ambad, Ghanasawangi, Partur, Mantha, Bhokardan, Jafrabad.

METHODOLOGY

1. DRG Meeting For Planning & Implementation of Programme.
2. District Level Workshop For BRC & CRC representatives for Identification of CWSN.
3. Screening Checklists Were Printed & Distributed To Each School In The Dist.
4. Medical Screening Camp At PHC Level for Identification of CWSN.
5. Block Level Assessment Camp.
6. Screening By District Hospital Special Camps Headed By Civil Surgeon & Subject Experts.
7. The Results Of Experts Screening CWSN Data Collected On District Level.
8. Recommended for support services to CWSN i. e. operations & other things.

RESEARCH TOOLS

- Screening Checklists were printed & distributed for collecting data.
- Medical Screening Camp.

RESULTS & CONCLUSION

The Result & Conclusion are as below

- Identification of CWSN in the district.
- Creating awareness of IED activities among the society.
- With the help medical assessment camp of CWSN to identify &certify as per the category of the child with technical support from medical experts &rehabilitation professional.

- Certify for corrective surgery as per the needs of the child & maintain the individual record of the child.
- Supply of physiotherapy equipment.
- Educational placement
- Provide aids & appliances as per the measurement of CWSN.

1. Statistical Data of CWSN screening at PHC, Block level, District level & Status of Support services to CWSN are shown below:

Visual Impaired

	Identified in survey	PHC check-up	Block check-up	Surgery completed
No. of Students	2716	2716	1386	32

	Surgery Type	Needful for surgery	Surgery completed
Ophthalmic	Cataract	15	10
	Squint	31	13
	Ptosis	16	05
	DCR	06	04

Orthopedic

	Identified in Survey	PHC check-up	Block check-up	Surgery completed
No. of Students	1935	1935	1244	19

	Surgery Type	Needful for surgery	Surgery completed
Ortho	TA length	41	12
	Finger	05	02
	Exa-Ptosis	02	02
	CTEV	14	02
	Adductor release	02	01
	Burn contracture	34	**

ENT

	Identified in survey	PHC check-up	Block check- up	Surgery completed
No. of Students	4515	4515	1737	11

The above table shows status of inclusive education in the District of Jalna.

IMPACT OF THE TRAINING MODULE IN ENHANCING THE COMPETENCY OF TEACHERS TO HANDLE CHILDREN WITH HEARING IMPAIRMENT

Kartikeswar Behera

Abstract

The study deals with the impact of the module in the competency of teachers in handling hearing impaired children in a regular school. The selected teachers were exposed to the module for 3 days. The module included a Pre-Test and a Post-Test. The entry level behaviour of the teachers with regard to handling the hearing impaired was judged and after extending intervention using the module their performance was recorded. Comparing the Pre-test with the Post-test results, the findings were arrived at. It was found that the Module exerted positive impact on the teachers to handle the children with hearing impairment.

INTRODUCTION

Children differ individually in the school but, they lead a community life with fellow feelings and brotherhood. In a democratic country it should be the motto of every school to inculcate the feeling of oneness among the learners of a school, so that discrimination should be wiped out from the mind of the children and attitude sharing will be developed in every child. The mandates of SSA aim at mainstreaming all the children irrespective of caste, creed and race and socio-economic status up to the age 14 years+. Inclusion involves students attending the same schools as siblings and members in general education class rooms with chronological age appropriate classmates, having individualized and relevant learning objectives, and being provided with the support necessary to learners' special education needs and related services. It does not mean students never receive small group instruction or that students are in general education classes to learn the core curriculum only (York, Kronbers and Dovie-Exceptional children, 1972). "Inclusive education means that all students are provided the support and opportunity they need. Every effort will be made to meet the individual needs of all students through a diverse and accommodating curriculum in a regular education environment. Collaborative planning, shared ownership and common responsibility for the education of all students will foster a climate of acceptance and support with the family, society and community."

Persons with Disabilities (Equal Opportunities, Protection of Rights & Full Participation) Act, 1995:

The landmark legislation in the history of special education in India is the Persons with Disabilities (Equal opportunities, protection of rights & full participation) Act, 1995. This comprehensive Act covers seven disabilities namely blindness, low vision, hearing impaired, locomotor impaired, mental retardation, leprosy cured and mental illness. Chapter V (Section 26) of the Act, which deals with education, mentions that the appropriate Governments and the local authorities shall:

- Ensure that every child with a disability has access to free education in an appropriate environment till he attains the age of eighteen years;
- Endeavour to promote the integration of students with disabilities in the normal schools.
- Promote setting up of special schools in governments and private sector for those in need of special education, in such a manner that children with disabilities living in any part of the country have access to such schools;
- Endeavour to equip the special schools for children with disabilities with vocational training facilities.

Recognizing that teachers need to be sensitized to the needs of CWSN, inclusive education has been incorporated as a part of the 20-day mandatory training of SSA teachers to make them aware of the concept, meaning and importance of inclusion. States are also running separate classes to equip teachers with classroom management skills. So far, states have given training to 16.37 lakh teachers through in-service training and 4.86 lakh teachers through 5-7 day training. researcher as a Teacher Educator in a DIET has conducted a number of training programmes and attended cluster level meetings. It is a demand of the teachers that they have attended short term orientations on IED (Integrated Education for Disabled) imparted by the District Project Coordinator on behalf of SSA, but they need specific training category wise. The researcher decided to adopt a Module with slight changes according to the need of the teachers and impart a mobile based training moving from school to school on Sundays for over a period of a month to impart both theoretical knowledge and classroom practice. Unless and until the efficacy of the module in enhancing the competency of the teachers is tested, the needs of the teacher will remain unsolved. In order to solve the need of the teachers of lab-area schools, the researcher took up a study on "Examining the impact of the training Module in enhancing the competency of teachers in handling children with hearing impairment".

ABOUT HEARING IMPAIRMENT

A child may be affected with hearing impairment, before birth, during birth or after birth. As stated by the experts the possible causes may be pre-mature delivery, lack of oxygen during birth and absence of birth cry and low birth weight i.e. less than 1.2 Kg. The causes after birth are deformities of ear, nose, face and throat and infectious diseases like mumps, measles, meningitis, viral fever, injury to ears, exposure to loud sound and neglected

ear discharges, etc.

Categories of Hearing Loss

- 1) Mild hearing Loss-(26 db to 40 db hearing loss)-A child with mild hearing loss will have trouble in hearing and understanding soft speech in a noisy background.
- 2) Moderate Hearing Loss-(41db to 55 db HL)- A child with moderate hearing loss will have difficulty in hearing conversation speech.

The other categories of children with hearing loss as mentioned below are sent to special schools for clinical treatment:

- Moderately severe hearing loss-(56 db to 70 db HL)
- Severe Hearing Loss-(71 db to 90 db HL)
- Profound hearing Loss-(91 db HL and above)

Support Services

- 1) Acceptance of the disability by others.
- 2) Right type of Hearing aid.
- 3) Proper use and maintenance of hearing aid.
- 4) Right ear mould fitting.
- 5) Speech training.
- 6) Language development.
- 7) Congenial and language stimulating environment.
- 8) Positive attitude.

In a class with children having hearing impairment the services in Sl. No, 1,5,6,7,8 are taken care of for effective teaching learning process but, the teacher should have a basic knowledge of it through orientation.

OBJECTIVES OF THE STUDY

- 1) To identify the training needs of the selected primary school teachers to deal children with special need (CWSN).
- 2) To train the selected teachers using the training module meant for children with hearing impairment.
- 3) To assess the competency of the teachers in handling children with hearing impairment as an effect of the training module.

HYPOTHESIS

- i) There is a positive impact of the module on the primary school teachers in dealing with children with hearing impairment.
- ii) After transaction of the Module the teachers will be able to handle the learners with hearing impairment.

INDEPENDENT VARIABLE (TRAINING MODULE)

The module is a set of key concepts relating to hearing impairment, activities prepared by the investigator which was used during teachers' training.

DEPENDENT VARIABLES

To empower the primary school teachers with a view to bringing about expected behavioral changes in handling the hearing impaired children.

DELIMITATIONS OF THE STUDY

- The study was delimited to 10 primary school teachers selected from the lab-area schools based on their interest and ability which the researcher came to know in course of discussion with them.
- The module developed by the researcher for dealing with hearing impaired children.

METHODOLOGY

Sample

10 teachers serving in primary schools (5 primary schools and two teachers from each school) of Khallikote block of Ganjam district in Orissa were selected for the purpose of the study.

Design of the study

It was a Pre-test and Post-test design administered on a single group. (Performance testing, extending intervention and final testing)

Tools

For the purpose of collection of data, the following tools were used:

- 1) Pre-test (Assessing the entry level behavior of the teachers in Hearing Impairment)
- 2) Module-(Developed by IGNOU, New Delhi on Inclusive Education, only the portions which were meant for children with hearing impairment were selected with slight changes in respect of Methodology as per the need of the class room context)
- 3) Work Sheet for teachers attending the training.
- 4) Observation schedule to be used by the observers.
- 5) Post-test- (to assess the behavioral changes of the teachers)

SCOPE OF THE MODULE

- Symptoms of hearing impaired children.
- Identification of hearing impaired children.
- Types of hearing aids and their use.
- Taking care of the hearing aids.
- Classroom Management.
- Use of teaching learning Materials/ Methods/ Techniques / Approach of teaching.
- Individual work
- Pair work.
- Group Work
- Collaborative work.
- Feed back
- Example of taking class on language.
- Cooperative learning

PROCEDURE ADOPTED

The teachers' entry level behaviour in respect of their knowledge and skill to handle children with hearing impairment was assessed through class room performance using observation schedule. After observing the classroom transactions the deficiencies in this respect were detected and their progress in terms of performance was marked. Thereafter, intervention was extended for a period of three days to enhance the knowledge and skill of the teachers with the help of the Module and related materials. Then, the teachers were asked to transact the module in their own schools which was observed term wise. After observing the classroom process of the teachers, performance of the individuals was recorded and their progress was compared.

GUIDELINES TO THE TEACHER FOR CLASS ROOM MANAGEMENT:

- The teacher must ensure noise reduction inside the classroom.
- Remain within 3 to 4 feet distance from the child.
- Stand/move in such a manner that your face must be lighted and the child must mark your lip movement.
- Allow the child to sit in the front ensuring the visibility and audibility of your speech.
- Ensure that the child can see the black board writing with focusing light.
- Sharing in pairs among the hearing impaired and the normal children

MATERIALS TO BE USED FOR TEACHING LEARNING PROCESS

- Charts in both written and pictorial forms.
- Written strips (size 2.5 feet to 1.2 feet long)
- Flash cards-3.5 inch x5.5 inch or postcard with pictures and words (for word picture association activity)
- Sensory training equipments

- Story books/picture books to develop vocabulary of the hearing impaired child and for practicing writing skills.
- Blocks-wooden or plastic cubes.
- Beads-for teaching counting, addition and subtraction.
- Jigsaw puzzle-A picture on a card board is cut into four or more parts and the child attempts to join these together to complete the picture.

Besides the above materials the following materials are also to be collected / prepared for use.

- Fruit chart.
- Birds chart.
- Animals chart.
- Flags of different countries.
- Maps of Orissa, India and globe.
- Models of fruits, vegetables, various forms of transport, furniture, etc. made of plastic/wood/clay may be used.
- Use of match box to prepare different contextual models.

PRE- TEST

Sl. No.	Competencies spelt out In the Module	Extent of conceptual clarity		
		Highly satisfactory	Satisfactory	Just a little
1	General awareness about hearing impaired children	—	2	8
2	Skills of class room Management:a) Seating arrangement	3	4	3
	Individual attention	—	6	4
	Grouping the learners with the normal Children	2	6	2
	Checking readiness of learners towards teaching learning process	2	6	2
3.	Teaching learning Process: Objectives of the lesson	2	4	4
	Use of methods and Techniques	2	4	4
	Use of materials	2	3	5
4.	Evaluation	2	4	4

The above table shows that almost all the teachers need training in different aspects of classroom management, transaction of teaching learning process, use of suitable method and techniques, use of teaching learning material and evaluation procedure.

SOME REFLECTIONS OF TRANSACTION OF THE MODULE

Subject: First language (Oriya)

Competencies selected for class room transaction

- a) Dialogue Practice (structured conversation)
- b) Listening to dictation and writing accordingly.
- c) Comprehension of paragraphs and response to who/what/why questions.

Response of the students

40% of the hearing impaired students were able to follow and respond. Speech was partly intelligible; some mistakes in writing dictation were identified and corrected by the teacher during demonstration.

Subject: Social Studies (Geography)

Competencies selected for class room transaction

- a) Map reading (identifying the location of a spot as per instruction)
- b) Describing the climate of a region
- c) Crops and food (Filling in the work sheet as per instructions)

Response of the students

50% of the hearing impaired students were able to follow and respond. Speech was partly intelligible; some mistakes in Map reading were identified and corrected by the teacher during teaching learning process.

Subject: Mathematics

Competencies selected for class room transaction

- a) Writing the numbers correctly as per dictation.
- b) Telling the place value of a digit in a number as per dictation.
- c) Place beads in abacus as per dictation.

Response of the students

35% of the hearing impaired students were able to follow and respond. Some mistakes were found out in telling the place value and corrected by the teacher then and there.

POST-TEST

Sl. No.	Competencies spelt out In the Module	Extent of conceptual clarity		
		Highly Satisfactory	Satisfactory	Just a little
1	General awareness about hearing impaired children	4	4	2
2	Skills of class room Management: Seating arrangement	5	3	2
	Individual attention	4	3	3
	Grouping the learners with the normal Children	5	5	0
	Checking readiness of learners towards teaching learning Process	3	6	1
3	Teaching learning Process: Objectives of the Lesson	4	4	2
	Use of methods and Techniques	4	4	2
	Use of materials	5	3	2
4	Evaluation	5	3	3

RESULTS AND DISCUSSION

While comparing the results of the pre-test with the Post-test with regard to general awareness, it was found highly satisfactory in case of 40% teachers whereas it was Nil at the Pre-test stage. With regard to skills of class room management, it was marked highly satisfactory with 20% increase as against pre-test. It was found that initially no teacher was conscious of paying individual attention, but after intervention it was found to be highly satisfactory as 40% of teachers were alert in this connection. Though grouping hearing impaired children with normal children is very much essential from peer assisted learning point of view, it was negligible at the Pre-test stage, but, 50% of teachers were found very much conscious regarding grouping during class room transaction as an effect of the intervention extended through the Module. With regard to teaching learning process, very few teachers were conscious of the objectives of the lesson and methods of teaching before intervention. But, substantial improvement was marked i.e. 40% of the teachers were conscious of the objectives and methods of teaching after intervention. Use of materials in a mixed class of normal with CWSN is very much instrumental, which was lacking before

intervention but, it was up to mark after intervention so far as appropriateness in the use of the materials and motivating the students in the TL process were taken into account. In a normal class teachers are not so meticulous in asking questions which was observed before intervention but, it was quite satisfactory as 50% of teachers were conscious of doing that after intervention.

So, the hypothesis no-1 and 2 are retained as the impact of the module proved effective.

FINDINGS

- i) 80% of the teachers lacked basic knowledge about use of hearing aids.
- ii) 40% of the teachers became aware of the know-how's of transacting the teaching learning process to the children with hearing impaired with the normal students of the class and 40% need training in this regard.
- iii) Almost all the teachers acquired required knowledge and skill with regard to class room management.
- iv) 50% of the teachers were able to choose the appropriate TLMs, which they can prepare at their level.
- v) 50% teachers need second round training on the Module.
- vi) As Hearing aids could not be used during transaction of the module, the teachers put forth their demand for that.

IMPLICATIONS

- 1) This module can be used for training other teachers to deal children with hearing impairment.
- 2) Although some of the teachers could not prove proficient during training if it will be used time and again in classroom practice they can overcome their defects.
- 3) In large scale some of the strategies can be applied for preparation of resource teacher.
- 4) The module can be tried out in large scale with adequate number of teachers.
- 5) As the module is designed both for the normal children and hearing impaired children, it will save extra labour of teachers.
- 6) Teachers can apply the skill in preparing TLMs for use by children in inclusive set up.
- 7) The teachers will be more confident to teach the children with hearing impairment.
- 8) With an inclusive context and a little bit modification, this can be applied in special schools.

CONCLUSION

In order to fulfill the mandates of SSA, so far as mainstreaming all categories of children and providing quality education, teachers working in primary schools should be given short term training with theoretical

knowledge and practical school session to deal the children with special needs (CWSN). Similar specific Modules for other categories of children can be prepared and teachers should be trained to handle the class effectively. Teachers should be specially trained on the use of hearing aids, ear moulds, etc. to come to the rescue of the hearing impaired children as and when needed.

REFERENCES

- Hand book on Inclusive Education (for Elementary School teachers)-published by DEP-SSA, IGNOU, New Delhi.
- Journal of Indian Education-Volume-XXVII, November-2003, published by NCERT, New Delhi.
- Panda-K.C.-Article-Your Vision-our future, Inclusive Education Revision.
- Chauhan,S.S-Advanced Educational Psychology-Sixth Revised edition
- Kuppuswamy.B - A text book of Child Behaviour and Development.

DEVELOPING WRITING SKILL OF ENGLISH ALPHABET AMONG THE CHILDREN WITH SPECIAL NEEDS - A REMEDIAL TEACHING STRATEGY

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Abstract

The research study was undertaken with two main objectives in view: (i) to develop Fast Learners Assisted Instruction Strategy (Peer Group Interaction Strategy) to develop writing skill of English alphabet among the Children With Special Needs and to study the extent to which this strategy is useful in enhancing the achievement level of students in English. It was observed that the achievement level of Children With Special Needs in primary school is not appreciable in English subject. There is no remedial and feedback teaching to improve the achievement level of slow learners and Children With Special Needs in English subject. Keeping these factors in mind the investigator has developed a Fast Learners Assisted Instruction Method In Developing The Writing Skill Of English Alphabet Among The Children With Special Needs. In Fast Learners Assisted Interaction Strategy the teacher taught the writing skill of English Alphabet A, B & C to the students of the experimental group. Then the Teacher instructed the fast learners to help and teach the Children With Special Needs and slow learners to write the English Alphabet A, B & C. This process was repeated for teaching other Alphabets in English. Twenty Primary school Children With Special Needs of class I in selected Panchayat Union Primary Schools in Thiruvannamalai District were selected as sample for this study. They were divided into two groups namely control group and experimental group. The Writing Skill of English Alphabet were taught to the students of control group through the traditional method while the students of experimental group were taught the Writing Skill of English Alphabet through the application of Fast Learners Assisted Instruction for providing remedial teaching to children with special needs Strategy.

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Post-test was conducted to both control group and experimental group. The obtained results showed that the DEVELOPING THE WRITING SKILL OF ENGLISH ALPHABET AMONG THE CHILDREN WITH SPECIAL NEEDS were more effective than the traditional method in enhancing the achievement level of the Children With Special Needs and slow learners in English of class I. As this strategy is very simple, entails no extra cost and easy to handle each and every primary school teacher can utilize this strategy to enhance the achievement level of the students, class and school as a whole in English. This Fast Learners Assisted Interaction Strategy in providing remedial teaching can be applicable to all subjects and to all standards of education to enhance the achievement level of Children With Special Needs and slow learners to a considerable extent.

INTRODUCTION

The Elementary Education is the foundation of all Higher Education. The MLL Strategies laid more emphasis to give importance to each and every stage of elementary education to educate the children to attain mastery level with equity. Children with special needs are very few in our regular schools. SSA ensures that children with special needs can be provided quality elementary education in regular schools. SSA also ensures that every child with special needs, irrespective of the kind, category and degree of disability, be provided meaningful and quality education. To improve the quality of Elementary education to Children With Special Needs more and more researches are in urgent need.

BACKGROUND AND NEED FOR THE STUDY

The performance of Children With Special Needs at all levels of Education is not encouraging. There is no remedial and feedback teaching to the slow learners and Children With Special Needs in many school. In multi-grade teaching school the condition of the Children With Special Needs is miserable of the miserable the most miserable. In every school the powerful human resources (Fast Learners) are available. Most of the teachers do not know the art of utilizing them (Fast Learners) in teaching learning process. The students in many schools are made passive listeners. Instead of providing remedial and feedback teaching the teacher escape simply by beating and scolding the students for not answering the questions or task given to them. Most of the teachers do not know the art of involving all types of students in teaching learning process. The foremost duty of every elementary school teacher is to provide enough remedial and feedback teaching to the innocent slow learners, SC/ST students, Girl Children and Children With Special Needs. Keeping these factors in mind the investigator has developed a remedial strategy entitled "Effectiveness Of Fast Learners Assisted Instruction Method In Developing The Writing Skill Of English Alphabet Among The Children With Special Needs".

OBJECTIVES

- To introduce Fast Learners Assisted Instruction Method In Developing The Writing Skill Of English Alphabet Among The Children With Special Needs Strategy to primary school teachers and their reactions
- To measure the effectiveness of Fast Learners Assisted Instruction Method In Developing The Writing Skill Of English Alphabet Among The Children With Special Needs
- To utilize the human resource (Fast Learners) for providing remedial teaching to the Children With Special Needs and Slow Learners
- To develop co-operative attitude among the regular and Children with special needs.
- To reduce the wastage and stagnation in multi-grade teaching
- To motivate the children with special needs to improve their skill in language subjects

HYPOTHESES

- There exists no significant difference between the pre-test and post-test mean score of the Control Group when the writing skill of English Alphabet is taught through the traditional chalk and talk method
- There exists significant difference between the pre-test and post-test mean score of Experimental Group when the writing skill of English Alphabet is taught through the application of Fast Learners Assisted Instruction Method.
- There exists significant difference between the post-test means scores of the Control Group and the Experimental Group.

METHODOLOGY

The various steps involved in the methodology of the studies were identification of Children with special needs, design of sample, construction of research tool, administering research tools, collection of data and employing appropriate statistical techniques to arrive at scientific conclusion.

DEVELOPMENT OF STRATEGY

The following steps were followed in the development of the strategy:

Step-1

The teacher taught the students how to write the English alphabet 'A', 'B' & 'C' to the students of class I

Step-2

The teacher instructed the fast learners to help the slow learners and the children with special needs to write the English Alphabet correctly.

Step-3

The process is repeated for teaching the writing skill of other English Alphabets.

SAMPLE

For the purpose of the experimental study twenty Children With Special Needs from eight Elementary schools in Thiruannamalai District in Tamil Nadu were selected as sample.

CONSTRUCTION OF TOOL

To measure the performance of the students before and after the experiment, achievement tests were conducted by the investigators on the basis of item analysis. The content validity of the tool by experts and item validity by item analysis was established.

PROCEDURE

The following steps were followed in the procedure of this study:

Step-1

The Children With Special Needs were identified. They were divided into two groups. The control group was taught the writing skill of English Alphabet through the traditional chalk and talk method while the experimental group was taught the writing skill of English Alphabet through the application of Fast Learners Assisted Instruction Method in teaching the writing skill of English Alphabet among the Children With Special Needs.

Step-2

The Fast Learners Assisted Instruction Method Strategy for developing writing skill of English Alphabet among the Children With Special Needs was introduced and explained to the teachers in the selected Primary and Middle Schools in Thiruvannamalai District.

Step-3

This strategy was applied on the students through the class teachers.

Step-4

The post-test was conducted to both control and experimental group at the end of the experimental period of two months.

SCORING PROCEDURE

The pre-test and Post-test consisted 20 objective questions. They were to write 20 English alphabet for writing each alphabet of English correctly the score was one and for each wrong answer the score was zero.

DATA COLLECTION

The experiment was conducted for a period of two months.

At the end of the experimental period post-test was conducted to both the control group and the experimental group. The responses given by the students of control group and experimental group in pre-test and post-test formed the vital data required for the analysis.

STATISTICAL TECHNIQUES USED IN THE STUDY

The obtained data were analyzed by using appropriate statistical techniques such as Mean, Standard Deviation and t- Value to arrive at scientific conclusions.

FINDINGS AND CONCLUSION

Eight Panchayat Union Primary Schools in Kilpennathur were selected as sample for this project in Kilpennathur Block. Ten First Standard Children With Special Needs from Panchayat Union Primary Schools in Velanandal, Konalur, Kolathur and Rajathoppu were selected as control group while Ten Children With Special Needs of first standard from Panchayat Union Primary Schools in Pollakunam, Sirunathur, Vedanatham and Kazhikulam were selected as experimental group.

Table-1 shows the pre-test and post-test score analysis of the I Std. Children of Special Needs of Panchayat Union Primary Schools, Kilpennathur Block (Control Group)

Name of the test	N	Mean	S.D	t-Value
Pre-test	10	8.0	2.2	1.9426**
Post-test	10	10.0	2.4	

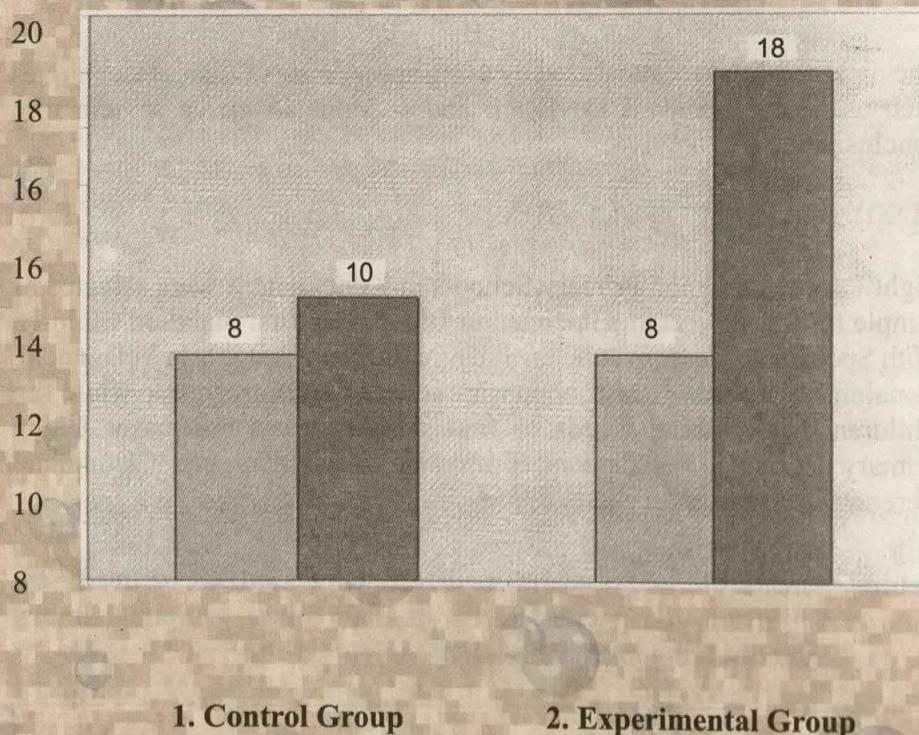
Note: ** denote the significance at 0.01 level. Improvement is 25 per cent.

Table-2 shows the pre-test and post-test score analysis of the V Std. Children of Special Needs of Panchayat Union Primary Schools, Kilpennathur Block (Experimental Group)

Name of the test	N	Mean	S.D	t-Value
Pre-test	8	8.0	2.6	
Post-test	8	18.0	3.2	7.6699**

Note: ** denote the significance at 0.01 level. Improvement is 125%.

Mean Score Analysis of the Control Group and Experimental Group



The rate of progress made by the experimental group Children With Special Needs is higher than that of the control group Children With Special Needs. In terms of percentage, the rate of progress made by the experimental group slow learners is 125% while the rate of progress made by the control group only 25%. The variations in the rate of progress made by both the groups is the resultant product of the implication of this Fast Learners Assisted Instruction Method Strategy for developing writing skill of English Alphabet among the Children With Special Needs.

EDUCATIONAL IMPLICATIONS

- The role of Fast Learners Assisted Instruction Method in providing Remedial Teaching to Children With Special Needs is more effective than the traditional lecture method in enhancing their achievement in English.
- All the children can involve in this Fast Learners Assisted Instruction Method of providing Remedial Teaching.
- This strategy can help the primary school teachers to enhance the achievement level of the Children With Special Needs and slow learners in English.
- This strategy makes children fearless and joyful.
- This strategy can save the time and energy of the primary school teachers.
- This Learner Centered Approach can minimize the wastage and stagnation in classroom teaching of Science.
- This strategy can help the teachers in Non-Formal Education Centers, Adult Education Centers, Education Guaranteed Scheme Centers, Alternative and Innovative Education Centers and in Special Schools to enhance the achievement level of their students in English.
- Teachers can also utilize this Fast Learners Assisted Instruction strategy for providing Remedial Teaching to Slow learners and children with special needs in multi-grade teaching.
- This strategy can inspire Children With Special Needs and slow learners to cope with normal students to a considerable extent.
- As this strategy entails no additional cost, each and every school can utilize this strategy for providing remedial and feedback teaching to the Children with Special Needs and slow learners to enhance their achievement level in English.
- This strategy can be applicable in teaching all subjects and at all standards to enhance the achievement level of Children With Special Needs.
- This strategy can minimize the dropout rate and maximize the retention rate.
- This strategy can develop co-operative attitude among the students in the classroom.

REFERENCES

- Arora, G.L., Child Centered Education for Learning without Burden, Krishna publishing Company, Gurgaon (Haryana).
- Awarded Paper of Department of T.E. & Extension, Innovative Experiments & Practices in Teacher Education, N.c.E.R.T., New Delhi, March 1994
- Development of Education in India 1993-94, Education for all by 2000 A.D., M.H.R.D., Government of India, New Delhi, 1994.
- Government of India, 1996, Education and National Development, Ministry of Education, New Delhi

- Government of India, 1986, National Policy on Education, Ministry of Education, New Delhi
- JOHN W.BEST & JAMES V.KAHN, Research in Education, Prentice-Hall of India Private Limited, New Delhi, 1995.
- Journal of Education, N.C.E.R.T., August 1997.
- M.H.R.D., Minimum Level of Learning, Government of India, New Delhi
- N.C.E.R.T., Though on Education, Regional College of Education, Mysore, N.C.E.R.T., New Delhi.

A STUDY OF THE NEEDS OF VISUALLY IMPAIRED CHILDREN IN INTEGRATED SETTING

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Abstract

If the early Vedic Era can still boast of being near to idle era it is because Education at that time was for all. Today again we have realized the importance of education for all. It is the only way to fight the evils of society, injustice and proceed towards development.

The differently abled people are also a part of our society. A society can't progress if an integral part of it is left behind. The idea that they are a part of us takes a concrete form when we include them in regular setting with their normal peers. But being special they have special needs. In order to make them comfortable in integrated setting their educational and other needs should be recognized and met with. With this in view the study takes the help of questionnaire, and concludes that Braille books and technological aids can help enhance their academic performance. Teacher and peer support provides them good mental health and motivation to study harder. Co curricular activities lead to all round development of their personality.

INTRODUCTION

The dawn of this century has indeed brought a new ray of hope for the differently abled persons. The journey of these people down the centuries has been tough. The initial years were that of neglect. It was followed by the stage of pity and compassion mostly on religious consideration to reduce pain and misery of disabled persons. Then the slow realization came that the disabled persons are not a burden on us but an integral part of our society. They too have a right to the basic needs and necessities of life. The efforts of doctors, psychologists and educators and education and training of the disabled people were encouraged and special schools were established. Then the feeling of segregation came. Intentionally or unintentionally till we continue to keep these children away from us we are not giving the status

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of equals to them nor is there equity in treatment meted to them. It was also felt that the disabled person after education and training has to live in this society and so his exposure must be to every day life with normal people. It was also advantageous for normal children as acceptability would come from the very initial years and peer group support, understanding and friendship would develop. At this stage mainstream and integration of the disabled in general schools received attention as a part of normalization movement. Today the concept of 'Special needs' have emerged. It is based on the premise that most of the students encounter special needs in some learning areas at one time or the other in their educational career.

The phenomenon of the organization of the world community, after the realization of the unprecedented injustice done to and injuries inflicted on the deprived lot of human beings, compelled us to form the UNO(1945) which simultaneously undertook the uphill task of providing economic, social, political, educational and cultural justice to them (the disadvantaged ones). The declaration of the charter of the World Human Right (1948) infused an intellectual strength among the Statesman and educationist of the world to identify almost all the redressing measures for any deprivation. The identification of miseries of the world humanity was studied systematically from grass root level to the international order and befitting measures to encounter such miseries were proposed.

There is a growing conviction that so far as is humanly possible, the challenged people should have the opportunities for self fulfillment enjoyed by other people. Special education means specially designed instruction, which meets the special educational and related needs of an exceptional child. It is distinguished from regular educational programme meant for exceptional children by some unusual quality, something uncommon, noteworthy. It is something special special materials, special training techniques, special equipments and special help and/or special facilities may be required for special categories of children having needs. Special education meant for exceptional children whose special needs or abilities necessitate an individualized programme for education. Special education is based on the following principles -Principle of individual differences, Principle of zero reject, Principle of non discriminatory evaluation and Principle of least restrictive environment. A child who deviates intellectually, socially or emotionally do much from what is considered to be normal growth and development that he can not receive maximum benefit from regular school program and requires a special class or the supplementary instruction and services.

There are two broad categories of disabled children -physically disabled and mentally disabled. Again we can sub categorize the physically disabled in the following way Hearing impaired, Visually impaired, Orthopaedically handicapped. Because of their special needs and they are called special children, they need special facilities to meet their learning difficulties. Integrated special classes include the cooperative plan and the resource room. Under the cooperative plan the child is enrolled in the special class but

attends classes with normal children for a portion of the school day. Usually these programs encourage the child to participate gradually with non-disabled children beginning with such activities as music and social studies, where he can compete. The teacher functions as a tutor to facilitate his academic progress in the regular room, in addition to providing specialized instruction and the rest of the help comes from the resource room aiding difficult subjects like maths, geography, etc. Another organizational plan is the itinerant program. The child attends regular classes full time, and an itinerant teacher works with him individually or in a small group giving him assistance he may need with his academic work. This plan provides maximum opportunities for participation with non-disabled children. On the other hand Inclusion is the process of bringing exceptional children of whatever condition into the general classroom for their education. Full inclusion means that all students, regardless of handicapping condition or severity, will be in a regular classroom/program full time

INTEGRATING THE VISUALLY IMPAIRED

Totally Blind-a legally blind person is said to be one (1) who has visual acuity of 20/200 or less in the better eye even with correction, (2) or whose field of vision is so restricted that it subtends an angle of 20° or less in the better eye after correction. **Partially Sighted** --The partially sighted are those whose visual acuity falls between 20/70 and 20/200 in the better eye even after correction.

For educational purposes the blind are those who are so severely impaired that they must be taught to read by Braille, while the partially sighted can read print by using magnifying glasses or books with large print.

REVIEW OF RELATED LITERATURE

Regarding their placement in the integrated setting as the Sarva Shiksha Abhiyan aims at, we consulted the related literature to see if earlier visually impaired have been integrated and what problems were faced by them and if their needs are being realized in the special setting. Traditionally descriptive studies have focused on population of children and gathered information of prime interest to planners and policy makers. If the child's learning environment can be personalized to the extent that individual differences in learning styles or behaviors are accommodated, then it is likely that many behavior problems will decrease. If the main stream child's problems are academically related, he may need to be re taught basic skills or prerequisite skills. *Clunies* pointed out the importance of class-room organization, pupil grouping, teaching strategies as the challenge of educating pupils with special needs with normal schools can be met in many ways. Pupils with visual impairment can individually require very different kinds of lighting and hence can present a variety of needs with regard to positioning. *Bala (1985)* compared the physically handicapped and normal children between the age group of 12 to 14 yrs with respect to their personality traits. Blind children were restrained, worried and untidy. In

case of value, they were less economical and religious but had more social and aesthetic values. *Dimcovic* (1992) in his paper discusses the relationship between piagetian concepts and some other areas of development (language). The most significant correlations were found and it was argued that there is a deeper relation between language and thinking than is usually assumed. *Singh* (1995), identified good citizenship, self esteem and intellectual development as general needs of blind children in segregated setting and overcoming linguistic difficulty, willing to participate in cultural activities, not interested in longer stay in the classroom, Braille script, interest in music, need for inspiration for study, difficulty in home work as their special needs.

OBJECTIVES OF THE STUDY

- To identify the needs of children with visual impairment (CWSN) in regular schools with respect to i) education, ii) instructional process, iii) teaching attitude, and iv) Peer's attitude
- To identify the needs of CWSN (V.I.) in regular school with respect to co curricular activities.
- To identify the physical needs related to infrastructure facilities of CWSN in regular schools.

METHODOLOGY

The nature of the present study is descriptive or normative. Descriptive studies may take several forms. Survey is one of the important methods of descriptive study. Most surveys basically enquire into status quo. The survey is said to be more realistic than the experiment in that it investigates phenomenon in its natural setting. The present study aims at collecting the viewpoint of the visually impaired students in the city of Varanasi regarding their educational and other needs in an integrated setting.

TOOL USED

As there was no suitable standardized tool available to find the 'Need of Visually Impaired Students In Integrated Setting' a researcher made questionnaire was used in the study to obtain the view of the visually impaired students regarding their needs. It has been attached in Annexure-I at the end of the paper.

SAMPLE

In the present study a sample of 30 visually challenged students was selected from class IX to XII in the age group of 14 to 20 years. A purposive sample is selected by some arbitrary method because it is known to be representative of the total population, or it is known that it will produce well-matched groups. The idea is to pick out the sample in relation to some criteria which are considered important for the particular study.

COLLECTION OF DATA

The Principals of the institutes were helpful enough to permit us to administer the tool on the students. The questionnaire was typed in Braille so that the children could answer at their pace and speed.

DIFFICULTIES IN COLLECTION OF DATA

The task of data collection was not easy. As special children were not found in large numbers in any particular school we had to visit a large number of schools and first seek information if the relevant sample was available. Then we had to meet individual principals seeking permission for time to meet these children and administer the tool

METHOD OF DATA ANALYSIS

The data collected was only subjected to percentage calculated. For the sake of easy analysis interpretation and calculation of the obtained data a Master Chart was prepared as given in Table 1.

TABLE 1

Item No.	YES	%	NO	%
1. b)	30	100	0	0
2	30	100	0	0
3.	0	0	30	100
4.	30	100	0	0
5.	30	100	0	0
5.	30	100	0	0
6.	30	100	0	0
7.	30	100	0	0
8.	27	90	3	10
9.	0	0	30	100
10.	21	70	9	30
11.	3	10	27	90
12.	24	80	—	—
13.	0	0	30	100
14.	29	96	1	4
15. a)	30	100	—	—
15. b)	30	100	—	—
15. c)	30	100	—	—
16.	30	100	0	0
17.	22	73	8	27
18.	30	100	0	0
19.	30	100	0	0
20.	9	30	21	70
21.	8	27	22	73
22.	30	100	0	0
23.	25	83	8	17
24.	30	100	0	0
25.	28	93	2	7
26.	12	40	18	60
27. a)	24	80	—	—

27.b)	3	10	—	—
27.c)	3	10	—	—
28.	3	10	27	90
29.	0	0	30	100
30.	0	0	30	100
31.	30	100	0	0
32.	15	50	15	30
32.a)	15	100	0	0
32.b)	0	0	0	0
33.	24	80	6	20
34.	23	75	7	25
35.	30	100	0	0
36.	20	66	10	34
37.	30	100	0	0
38.	23	77	7	23
39.	30	100	0	0
40.	27	90	3	10
41.	30	100	0	0
42.	3	10	27	90
43.	12	40	18	60
44.	17	57	13	43
45.	30	100	0	0
46.	23	77	7	23
47.	27	90	3	10
48.	29	97	1	10
49.	29	97	1	10
50.	29	97	1	10
51.	26	87	4	13

FINDINGS

Description of the data and related inferences pertaining to each objective has been made sequentially. An attempt has been made to link the items of the schedule to obtain purposeful conclusions. The first part of the first objective was concerned with the educational needs of these children in integrated settings. It was found that 100% of the children read from their own notes taken in Braille from other books in the class. No Braille books are there available for loud reading. But the need to read in the class was highly felt by 100% of the children. The need of Braille books to write better assignments and to perform better in the examinations was also felt 100% of the children also felt that having talking books and cassettes would enhance their academic performance.

In exposure towards technological aids in teaching-learning, none knew the operational function of any of these devices. But 70% of the children were aware of the technological aids available for them in education. 10% of the students had studied with the help of these devices but 90% had not 80% also felt that introducing these aids would make their teaching better.

Assignments were not allowed to be submitted in Braille. And 90% of the children felt the need of their teacher's knowledge of Braille for better correction of their mistakes. During examination 100 per cent of the V I students were provided with scribe, extra time and separate settings.

The second part of the first objective pertains to the instructional needs of the children. 73% of the children felt that the teacher's slowing the pace of his speaking will help them take better notes. 100% felt that the teacher's helping them in taking notes would enhance their examination performance. 100% also felt that the teacher's modifying his style of teaching will help them more. 30% of the regular teachers consulted resource teachers. 27% of the students felt the teachers try to modify their teaching style for their maximum convenience.

The third part the first objective related to teachers attitude yielded the following results. 100% felt that the need of teacher's affectionate behaviour for better performance in a subject. 83% felt the need of teachers' encouragement to sit in the first bench acts as motivator for hard work. 100% felt that the teachers should be dynamic and involve them in class and bulletin board activities. Thus the need to be involved in these activities was realized. 93% felt that the teacher encouraged the peer group for better interaction with them. And 40% said that the body gestures were used for encouragement. 77% of the teachers encouraged to participate in co curricular activities.

The fourth part of the first objective referred to the need of infrastructural facilities. It was found that 80% of the children continuously moved with the help of friends. 10 per cent moved with counting steps and 10 per cent used sticks to move in the campus. They are also comfortable moving alone within the school campus. They did not feel the need of any change in architectural facilities within the school campus.

As for the second objective pertaining to the co curricular needs of the children, 100% of the children said that co curricular activities took place in the school. 50% of the children participated in them and felt that their personality was being enhanced by these activities. Remaining 50% also wanted to participate and felt the same. 70% of the children got to participate in the activities of their choice as they were conducted in the hobby classes. 30 per cent of the children wanted to learn new things for their hobby. 20 per cent played games and materials were provided from the school.

The last objective was related to their peer group needs. 100 per cent of the children had friends in the classroom. 90 per cent of the children said that their friends were always ready to help them. 100 per cent of their peers understood their problems and 10 per cent sympathized and moved away. 40 per cent is eager and quick in finding solutions to the problems. 57 per cent shared their lunches with them. 90 per cent helped them with their assignments. 77 per cent changed the rules of games to accommodate them. 97 per cent gladly introduced them to their family, invited to their homes and liked to celebrate festivals with them. 87 per cent of the Visually Impaired students were very comfortable with their sighted peers.

CRITICAL DISCUSSION

Discussing the above findings we see that regarding the educational needs

of the children, Braille books are necessary. In the integrated setting we find books in Braille are not available nor are talking books and cassettes. Survey shows that these are available in segregated settings like Hanuman Poddar School for Blind, Varanasi. These are directly felt needs as the children feel that these can help in enhancing their performance and achievements.

Same is the case of technological aids. The computers are there in 100% of these schools but none of the relevant software and hardware aids are used to make it available for the visually impaired students. Awareness among 70 per cent of the students about these innovations is from informal and non formal sources. These agree with the findings of Rai Adya Shakti (2006). 10 per cent of the students who have studied through technological aid may be coming from high SES group where the parents are aware and helping or are being financed by the NGO's who take care of their education after school like the 'World Literacy of Canada'.

Assignments not entertained in Braille redeem the creativity of these children and their knowledge of spellings.

The pace variation of the teacher was desired and so was his help and modification of teaching style and content matter. In the regular schools we do not have teachers who are specially trained and in certain cases trained teachers are also missing. Thus the need for trained teachers and the introduction of 'special education' as a paper in regular B. Ed was also felt not only during the instructional process but also while evaluating teachers attitude. 40 per cent only patted their students and mostly the teachers do smile and nod forgetting that such reinforcement does not reach the V.I. student. The teachers affectionate behavior encouragement in participation in curricular and co curricular activities are a fdt need of the students. Encouragement for sitting in the first bench is also felt highly. It agrees with the results of Pandey Avinash (20Q4). The need to change architectural facilities was not felt as the V I are physically perfect and have no difficulty in walking, climbing stairs or sitting.

In the second objective we find the need among children to participate in co curricular activities. Visual impairment reduces their area of functioning and they too want to enjoy leisure time. Music seems to be their choice activity and these tallies with the results of Singh Seema (1995). And as the data is from missionary schools, public schools and Kendriya Vidyalaya where hobby classes are there, it ensures their participation. 20 per cent of the students who were unable to participate in the activity of their choice is may be due to the fact tat it is not always possible to accommodate all the children (normal or visual). It also may be because hobby classes are not there in every school.

The last objective of peer group support indeed gives a bright picture. The healthy mixing and mingling may be due to the early age interaction, teacher's encouragement and spreading awareness of special education. Same can be attributed for family acceptance. The 3 per cent children who stay away may be due to their own adjustment problems. 10 per cent students who do not help may have the tendency of selfishness and may not

be helping their sighted peers as well.

IMPLICATION

1. Visually impaired children should be given enough opportunity to mix up with normal students.
2. Identification of the subjects in which these children feel difficulty and finding out teaching methods and preparation of teaching aids to ease these problems.
3. Inclusion needed of such games, sports and cultural activities in which these children can participate easily along with their non-disabled peers in regular schools.
4. Special arrangements should be made by the teachers for these students, for sitting in the front row.
5. The proper use of technology will enhance the performance and achievement level of these students.

CONCLUSION

In conclusion one may say that the need of Braille books, talking books and cassettes in ample measure is always there. Technological aids are needed to enhance the capabilities of these children. Those who used them after school felt it as a dire necessity in school. Trained teachers aware of the special needs of these children are also needed. The area of co curricular activities can be broadened and in case of gifted performances can be guided to be taken up as a vocation. Positive peer group support also highlights the benefits of awareness programs. Such programs should be continued to encourage more inflow of the children into schools. While conducting the study the absence of visually impaired students from Government Schools where SSA programs are running was deeply felt. Due to paucity of time only the urban area was covered but information was taken of the enrolment of the blind students in Government schools in other districts of UP and the outskirts of Varanasi which again yielded a negative result. Though these are in a way the limitations of this study but they in no way should be the limitation of Sarva Siksha Abhiyan in spreading the 'mantra' of education among these children, growth of more societal acceptability towards them and making a society where equity is also attained with equality.

REFERENCES

- Alper,S. and Ryndak, D.L (1992); Educating students with severe handicaps in regular classes, *Elementary School Journal*, 92(3).
- Ashcraft, S.C (1963); Blind And Partially Sighted Children, in L M. Dunn (Ed.), *Exceptional Children in the Schools*, New York Halt, Rinehart And Winston, New York.
- Bain, A. (1992);Issues in the Integration of Regular and Special Education- an Australian Perspective, *Australian Journal of Education*, 36(1).
- Carlberg, C. and Kavale, K.(1980);The efficacy of Special versus

Regular Class Placement for Exceptional Children-a Metanalysis, *Journal of Special Education, vol.14.* -Private Limited, New Delhi.

- Pandey, Avinash (2005). Integrated Education: A View Point of Visually Challenged Students Studying in Special Schools in Varanasi, Unpublished M.Ed Dissertation, BHU, Varanasi.
- Rai Adya Shakti. (2006); To Study the Problems of Visually Impaired Students In Integrated Setting, Unpublished M.Ed Dissertation, BHU, Varanasi.
- Rathore, H.C.S (1990); Integrated Education of Visually Impaired Children, Shree Ram Prakashan, Varanasi. ■ Singh, Seema (1995); Educational Needs, Relevant curriculum and Rehabilitation Expectations of Handicapped Children, Published Doctoral Dissertation, BHU, Varanasi.

ANNEXURE I

QUESTIONNAIRE (RESEARCHER MADE)

1. How do you read in the class don't read in the school. a) Braille books, b) notes taken from other books, c) don't read in the school.
2. Do you feel that you need to read in the class?
3. Are Braille books available in the schools to you in every subject?
4. Do you feel that if books were there then your assignments would have been any better written?
5. Do you feel that more books should be there to help you preparing for the Exam?
6. Do you feel that talking books and cassettes would help you in the exam?
7. Are your notes taken in the class through Braille only?
8. Do you feel that if the lectures of the teachers were recorded you could take notes better and at your convenience?
9. Can you operate any technological device?
10. Are you aware of any technological device used for visually impaired students?
11. Have you ever studied with the help of these devices?
12. Do you feel that if these aids were available, studying would have been easier to you?
13. Are you allowed to submit your assignments in Braille?
14. Do you feel that your teacher should be able to read Braille, to correct your mistakes better?
15. Are you provided with any special facility during exam a) scribe b) extra time c) separate sitting.
16. Do you feel that you should be able to write in Braille for your exams?
17. Do you feel that the teacher slowing his pace of teaching will help you take better notes?
18. Do you feel that your teachers, help in taking notes can help you score better in the examination?
19. Do you think that your teachers' modifying their teaching style will help you understand better?
20. Does your regular teacher consult your resource teacher?
21. Does your teacher modify the content of teaching for your maximum convenience?

22. Do you think that the teachers' affectionate behaviour may help you perform better in the subject?
23. Does your teachers' encouragement to you to sit in the first bench acts as a motivator to work harder?
24. Do you feel that your teacher should involve you in class and bulletin board activities?
25. Does your teacher encourage your peer group to have more interaction with you?
26. Does your teacher pat you on the back?
27. Do you feel the need of a) a friend , b) stick , and c) count steps to move around in the campus?
28. Are you comfortable in moving alone in the school campus?
29. Do you feel the need for changes in infra structural facilities in the school campus?
30. Are you given formal training to move freely in the school campus?
31. Do co-curricular activities take place in your school?
32. Do you participate in them?
 - a) Does participation enhance your personality?
 - b) Do you think that participation will enhance your personality?
33. Do you get to participate in the activity of your choice?
34. Are any of these activities taught to you in hobby classes?
35. Do you want to learn something new and take it as hobby?
36. Do you play games in the school?
37. Are sports material provided to you by the school?
38. Does your teacher encourage you to participate in co curricular activities?
39. Do you have friends in the classroom?
40. Are your friends always willing to help you?
41. Do they understand the problems you face in the class?
42. Do they sympathize with you and move away?
43. Do they are quick to find solutions to your problems?
44. Do your friends share their lunch with you?
45. Do they help you with your home assignment?
46. Are they are always ready to change the rules of the games to accommodate you?
47. Are they willing to play games you want to play?
48. Do your friends introduce you to their home and family?
49. Do they invite you to their home?
50. Do they like celebrating festivals with you?
51. Do you feel at ease with your sighted peers?

INNOVATIVE READINESS KIT FOR MENTALLY RETARDED CHILDREN

Ms. E. J. Sooda Beevi *

INTRODUCTION

Education should be regarded as the fundamental right of every child. At the heart of the every reform there should be the aim to create a child centered and individualized approach to offer all round balanced learning opportunities to all children. The goal will be to ensure that every child according to his/her aptitudes and abilities attain the basic competency of development. This need to be strengthened by the belief that 'every child can learn'. Every child would be provided equitable opportunities of which appropriate mechanisms need to be developed.

Inclusive education is a feasible alternative to reach children with disabilities and provide them with their basic right to education. Class room inclusion is a situation where a child with special needs participates in all activities which other normal children are engaged. Education for children with mental handicaps has undergone significant changes. From segregated residential placement, the momentum has now swung towards inclusive education placement. Research indicates that children with mental handicaps show significant gains in social and academic skills if placed in inclusive education environment. But persons who are mentally retarded do not develop in childhood as quickly as other children.

Repeated learning improves memory in the mentally retarded. Presentation of materials using concrete objects improve both learning and memory followed by pictorial and symbolic material presentation. Mentally retarded children need more extended periods of activities for academic preparation. There is a need to develop their reasoning ability. Primary school teachers need to emphasize manipulation of concrete objects. Varied experience should be provided to enhance their imaginative powers. The motto for them should be "learning by doing".

Need and significance of the study

The investigator got a chance to visit all inclusive schools in Kollam district. Then the investigator noticed the class room activities of different types of disabled children and especially mentally retarded. After the class room observation and the formal talk with class room teachers, the researcher gathered the view that teaching the mentally retarded is too difficult. In every monthly review and sharing of experiences with Resource teachers who are helping the specially needed children, they expressed that dealing with the mentally retarded children is most difficult among all the exceptional children.

By means of continuous class room observation the investigator found out that the mentally retarded children have difficulty with memory. They have a poor self concept and are very impulsive. Communicative skills and muscular co-ordinations are less to notice among the mentally retarded. These skills are essential for children for doing most of the learning tasks. These basic skills are very important for alround development of children. If they acquire readiness skills, it is very easy to teach the basic skills. This is the common problem in our state. So the investigator took up this issue and made a small attempt to study the issue.

Objectives of the study

Major objective of this study is to prepare of an innovative Readiness kit for mentally retarded children.

The specific objectives are

To develop Readiness skills in such areas as:

- Language skills
- Motor skills
- Reading and writing skills
- Numerical skills
- Social and domestic skills
- Aesthetic skills.

METHODOLOGY

The sample for the present study consisted of 34 students from 6 lower primary sections in Kollam district of which 3 were Govt. schools and 3 were aided schools.

Table I

S. No.	Name of Schools	Type of Management	Students		
			Sex		Total
			Male	Female	
1.	GLPS Kariara	Govt.	5	3	8
2.	GLPS Vettikkavala	Govt.	2	4	6
3.	Panchayat LPS Thrikkaruvu	Aided	2	3	5
4.	NSS UPS Malayalisabha	Aided	3	2	5
5.	GUPS Padinjattinkara	Govt.	2	3	5
6.	St. Andrew's UPS Kanathar Kunnam	Aided	4	1	5
Total Students					34

Tools

The tools used for the present study are :

Observation Schedule

The investigator visited the schools to observe the behaviour peculiarities of mentally retarded children noted in the observation schedule. The tool used for observation is given in Appendix I.

Behavioral Assessment scales

The Behavioural Assessment scales for Indian children with Mental retardation is another tool

With the help of this scale six areas of level also be calculated. They are Motor skills, Language skills, reading and writing skills, Numerical and time skill, Social and domestic skill and were Aesthetic skills.

Ten items were included in each areas of skills. The Investigator decided to conduct pre-test and final test by using behavioral assessment scales for Indian mentally retarded children. The selected schools were visited continuously to observe the behavior of mentally retarded children and tried to complete suitable Readiness kits within three months. The final list was circulated to note achievement using a 5 point observation schedule. The schedule included the following levels.

Independent

If the child performs the listed behavior without any kind of physical or verbal help, it is marked as independent and given a score of 5.

Clueing

If the child performs the listed behavior only with some kind of verbal hints or gastrula clues, it is marked as clueing and gives a score of 4.

Verbal Prompting

If the child performs the listed behavior only with some kind of accompanying verbal statement, it is marked as verbal prompting and given a score of 3.

Physical Prompting

If the child performs the listed behavior only with some kind of accompanying physical help, it is marked as physical prompting and given a score of

Totally dependent

If the child does not perform the listed behaviour currently, although he/ she can be trained to do so, it is marked as totally dependent and given a score of 1.

INTERVENTIONS

Readiness kit 1: Play and Games Songs

1. Musical Chair
2. Passing the parcel
3. Leader game
4. Flying and not
5. Number game
6. Feather race
7. Touch the balloon
8. Clay modeling
9. Vegetable printing
10. Spray painting

Readiness Kit II - Action

1. Onnum onnum randalle
2. Number relate songs
3. Sanchiyilundumanchadi
4. Onnennu Parayumbol
5. Njanum
Njayarumorumichu
6. Kunje Kunje Unarunaru...
7. Brush.. Brush... Brush...
8. Baa, baa, black sheep
9. Johny, Johny, Yes Papa.
10. Clap your Hands...

Readiness kit III - Activities

1. Faces
2. Match the design
3. Group them
4. Attribute game
5. Picture talk
6. Pre-writing
7. Written down talk
8. I can read
9. Pin wheels
10. Weight match

The Readiness kits include certain activities, play, and games, action songs, and such other creative activities.

Monthly review was done after giving first readiness kit. Children showed interest in doing the activities and changes were noticed in the behaviour.

These Readiness kits were prepared and used in each school. Before giving these activities the investigator found that the mentally retarded children were not participating in activities. They always sat in a corner. The peer group did not care for these children. The teacher also did not give sufficient care to help them take part in different activities. In these circumstances the investigator took 3 months to complete these activities. These activities were reported in each school on different occasions. After giving these activities a desirable change, interest and attitude could be seen from the mentally retarded children.

Plays and Games

This kit contains plays, games and creative activities, play and games are the indispensable avenue for learning. The crucial value of play in the development of children's thinking has yet to be fully understood by teachers and parents. Play clarifies concepts and gives children opportunities to explore, to imagine and to translate experience into something meaningful to them. Play is the natural and most effective means through which a young child learns. The relationship between Sensory experience and play activities is a very important factor. Play way method is the best method to acquire skills, abilities attitudes and interest.

1. Musical Chair

Objectives

Developing interest, fine motor and gross motor development. Reasoning ability, acting according to the music, confidence, interpersonal intelligence etc.

Materials

Music or whistle, chairs etc.

Instruction

Arrange the chairs in a proper way. Give the instruction of the play clearly.

Activity

Arrange the students in a Small group having a maximum 10 students. Place 9 chairs. Teacher allows the students simply run. When the music stop playing, they find the chair and sit on it. One student is left without any chair to sit on. He/she will move out from the play. The play will repeat by removing one chair each time. Find the winner.

Discussion

Can you give a running commentary of musical chair? Who was moved out first?

2. Passing the Parcel

Objectives

Developing sportsmanship, fine and gross motor development, acting according to the instruction to develop aesthetic skill and attitudes.

Materials

A small parcel, bell, etc.

Instruction

When the bell keeps ringing the Parcel gets handed over continuously. When the bell stops the holder of the parcel gets out of the play.

Activity

Teacher arranges the students in the form of a circle and gives a small parcel to one student. When the bell keeps ringing the students pass the parcel to the student nearby continuously. When the bell stops passing the parcel is also stopped. The parcel holder is removed from the play. Again bell starts ringing and the process also continues. Find out the winner.

Discussion

To whom the teacher gives the parcel? Who is the first holder of the parcel? Who is the first outer of this play? Can you explain the process of the play? Who is the winner?

3. Leader Game

Objectives

Developing listening ability, acting at appropriate time, developing interest, interpersonal ability etc.

Instruction

One who fails to find out the leader will go out in the play.

Activity

Arrange the students in the form of a circle. Allow one student to go out of the class (firstly a Normal child). Then other students select a leader. When the leader does any thing the others also do the same action. The student sent out is allowed to enter the class. He is expected to find out the leader. If he cannot, he will move out in this play. They play again by choosing a different leaders, the process continues.

Discussion

How can you find out the leader? Is it easy? Why? Can you give any other suggestion for this play?

4. Flying and not

Objectives; recognizing the activities of different birds and animals, developing vocabulary interpersonal ability, physical exercise, Reasoning ability etc.

Activity

When the teacher mentioned a flying object or creature, then all students imitates its flying action. If any body fails to show he/she will be sent out in this play. This play will be repeated until one student is left out of the whole group (make sure the participation of mentally retarded children)

Discussion

List 5 animal, birds. Can you mention a bird which can not fly?

5. Number Game

Objective

Gross motor and Fine motor co-ordination, numerical ability up to 4 materials.

Activity

Arrange the students in the form of a circle. Count the number 1 to 4. For the fifth student instead of saying the number 5, he/she is asked to clap hands. Repeat this. If anybody fails to clap, will be out of this play.

Discussion

Count 1 to 5. After four count which number follows? Take five objects from the ground. Can you say how many legs does a table have? How many finger are there on your hand? etc...

6. Brush Brush Brush

Objectives

To know about habitual actions. Act according to the direction.

Materials

Brush, Comb, etc..

Brush - Brush - Brush

Brush your teeth on everyday (2)

Wash - Wash - Wash

Wash your mouth every day

Clean - Clean - Clean

Clean your hand before you eat.

Bath-Bath-Bath

Bath well every day.

Comb - Comb - Comb

Comb your hair neat & tidy.

Activity

Firstly the teacher sings the action song with fall rhythm and action. The students will follow. When the teacher ask the students to show brushing, bathing, washing etc. The students will demonstrate the act.

Discussion

What are the needs for cleaning your hand before eating?

7. Clap your hands

Objectives

To develop physical exercise. To develop vocabulary and interest. Act according to the instruction.

Clap you hands
Clap your hands
Listen to the music
And clap your hands.
Stamp your feet
Stamp your feet
Listen to the music
And Stamp your feet.
Turnaround
Turnaround
Listen to the music
And Turn around.
Jump up high
Jump up high
Listen to the music
And Jump up high.

Activities

When the teacher sings action song with rhythm and action, the pupil will follow. The students repeat the action song group wise and then individually.

Discussion

Do you like music? Can you say something about your hand?

Readiness kit III

1. Faces

Objectives

Observing similarities and differences in detail, matching.

Materials

Picture supplement, Pasted on boxboard, container for cards.

Instruction

Comparing of different pairs of faces.

Activity

Place a row of 4 faces at a time in which only two faces are alike. Let the child find the two faces that are one and the same. Make the game more difficult by placing a row of 5 faces. Then 6 faces and so on, asking the child to pick out only the similar pair each time.

The game can vary with a row of 3 faces at a time in which two are alike and only one is different. Ask the child to find out the faces which are different. Children can amuse themselves by serving the cards into 9 similar pairs.

Discussion

How many different faces can you find? In what ways are the two different? Is it a happy face or sad face?

2. Match the design



Objectives

Observing similarities and differences, matching etc.

Materials

Scrap of cloth from left overs of dress materials. 18 pairs of cloth pieces. Each pairs must be identical. Collect a variety in different colours and designs, ie., plain, checked, printed, striped... A file or card paper folder. Container for cards. 18 old cards or pieces of card board.

Instruction

Paste one piece of each pair of cloth pieces inside the file and the other piece on a card.

Activity

The child looks at each card, finds the matching cloth on the file and puts the card on it.

Discussion

What colour is this? Can you say some object of this colour? How many of them in yellow? Which ones are smooth? Which do you like best? Why? Make the activity more difficult by using many more samples and decreasing the size of each.

3. Picture talk



Objectives

Developing listening skills, developing vocabulary and syntax for a range of communication skills that is to describe people, events and action, to reason, to give explanations and make predictions, to express feelings and opinions, to imagine.

Materials

Picture supplement. Pasted on the box board container for card.

Activity

Use this picture set to encourage children to talk freely. Keep the atmosphere as informal and "Chatty" as possible. The card allows for different uses of language as listed in the objectives above, depending on the questions. You ask but remember, the questions should be open ended. This means that there is no right answer or wrong answer. The idea is that children should feel free to express themselves. Here are some suggestions for activities.

Listen

Put any four pictures face down on the floor or table. Ask children to listen carefully as you describe one of them. They have to turn the cards over and pick out the one that matches your description.

Show and tell

Children can choose a picture and say whatever they like about it.

What are they doing?

Distribute the cards. Ask children to look at the picture and answer the question. Eg: "What are they doing"? Their responses will involve the use of many action words (verbs).

What are they feeling?

Children can try to answer the question. "What are they feeling?" Through understanding the context of each picture. They can use several adjectives for the basic emotions which all children experience. Eg: angry, afraid, happy, sad, proud etc.

What is happening?

To answer this question, children have to go a step further. They have to perceive each picture as a whole. Integrate all the details in their minds and try to describe the action or event, the **people**, the feelings and so on.

Why

Ask children why they think a particular action in a picture is taking place. E.g.: Why is the baby crying?

What happens next

Children use their imagination to predict what could happen after the action or event depicted in each picture. Eg. They fight so much that one of them gets badly hurt, or for the same picture, mother comes in, they stop fighting and start playing again, for another picture, they catch a huge fish, etc. (Remember there is no one right answer but several different possibilities).

Make up a story

Each picture can suggest a story, children can choose a picture and make up a story about the people and the actions or events that it depicts.

Pre-Writing

Among all the languages of this world, the mother tongue helps to convey the mode of communication of the particular region or country. Children at primary level find difficulties in writing correctly. Especially the children with special needs will face more difficulties than normal ones. The pre-writing ability is then a way to teach the basic writing skill. So before writing he/she must know how to write, how to draw, how to end the line, how to use pen and pencil etc. To avoid or minimize this error and complication certain method or strategy can be adopted for writing.

1. Pre-Writing

Objectives

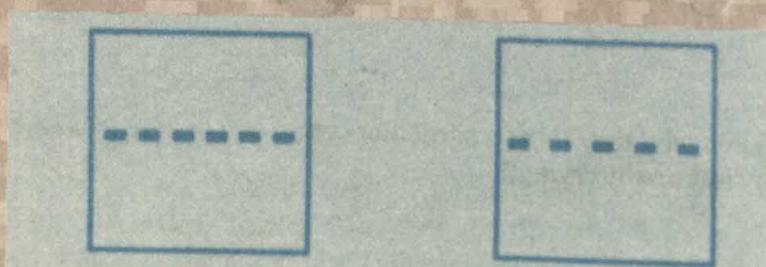
To be given practice to handle the writing materials like pen/pencil. To be given practice for muscular movements. Concentration and confidence for writing. To be given practice to draw correct strokes.

Materials

Writing materials, colour pencil, paper

Activity

Children are involved to draw horizontal straight lines by connecting the dots. The number of dots for a given distance are reduced step by step by this method children are taught to practice to draw a straight line as shown below.



By giving such dots, connecting techniques children are practiced for various strokes, viz, lines, curves and clockwise and anticlockwise, circle.

LEARNING ACTIVITIES TO AVOID COMPLICATION

1. Drawing a Horizontal line

2. Drawing a Vertical line

3. Drawing a Right slanting line

4. Drawing a Left slanting line

5. Drawing a half clock-wise curve

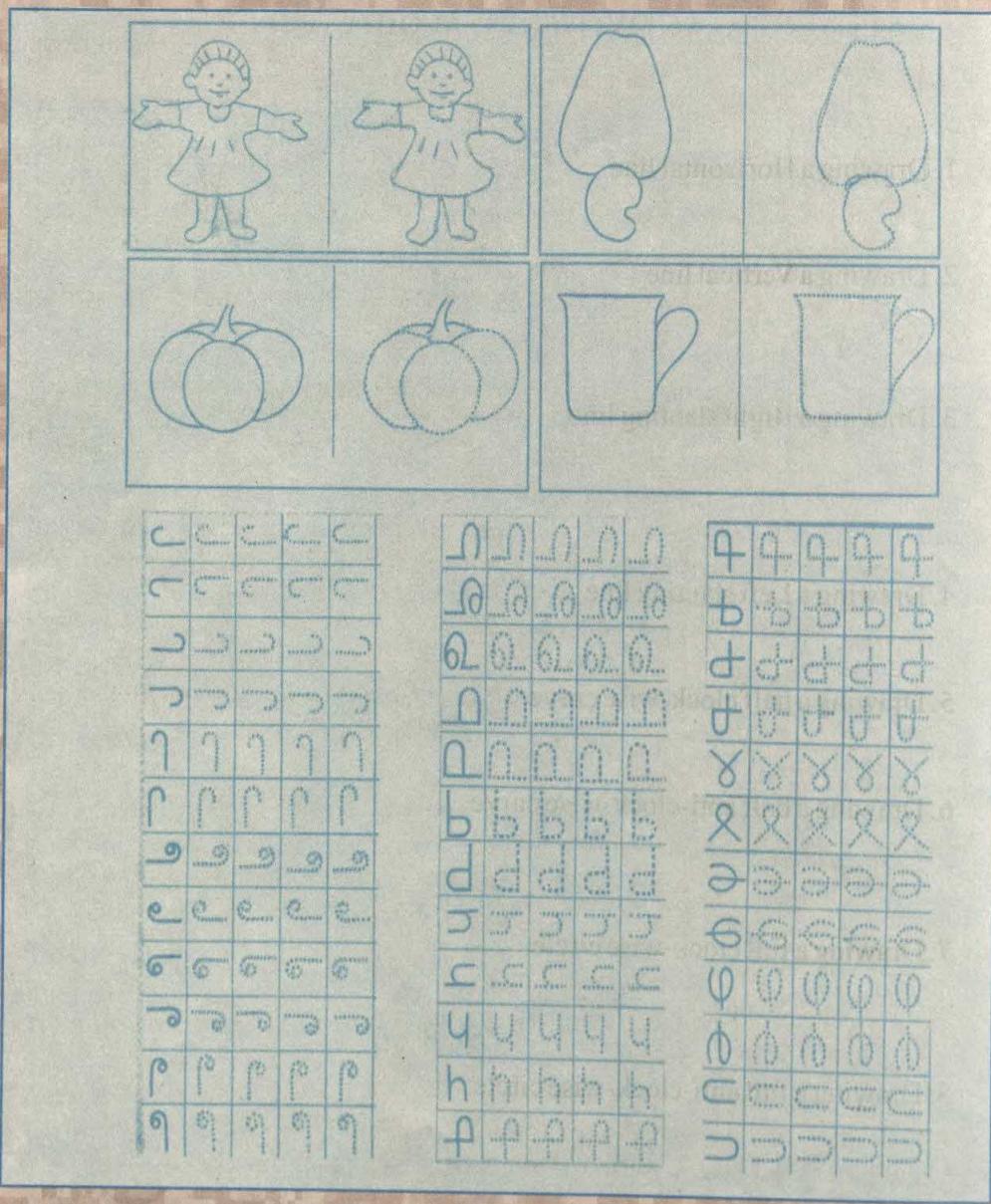
6. Drawing a half anti-clock-wise curve

7. Drawing a full clock-wise circle

8. Drawing a full anti-clock-wise circle



Examples for Pre-writing activities



7. Written - down talk

Objectives: Learning to read through language-experience.

Materials: A blank pad or paper, card paper for making small work cards, scissors, sketch pens, crayons, container for word cards.

Instructions: Cut the card paper into strips.

Activity

The language - experience approach to reading is essentially a method of teaching children to read through 'written-down-talk'. The method involves 5 simple steps.

Step 1: Encourage the child to talk about a personal experience, thought or feeling of immediate significance. She/he can draw a picture about it if he/she likes. E.g.: The child might talk about a favorite toy, an accident she/he saw on the road, a recent frightening experience. Last night's funny TV show, a delicious cake and so on. Focus on one theme or topic on a given day.

Step 2: Help the child to dictate one or two sentences about the experience or picture. Write down the dictated sentences.

Step 3: Help him/her 'read' these sentences back to teacher. At first this might involve the reading of above by the teacher slowly word by word and encouraging him/her to repeat after them.

Step 4: Choose 2 or 3 key words (E.g.: the scooter bumped into the car, I was scared of the lizard, my grand mother gave me a new dress...) From these sentences choose certain content words and write them on separate word cards. Help the child 'read' these word cards. We can find that she/he soon begins to recognize these words because they have a particular meaning. Store the word cards in a little box to be used again and again.

Step 5: Repeat the above step with different things to talk about or illustrate, through pictures, two or three times a week. Each time, previous sentences and word cards are reviewed and new ones added according to each new topic. Besides the cards for the key words, we can gradually see whether the child can recognize some of the other words in the sentences.

Suggestions for larger class room

The language-experience approach can be adapted for larger class rooms. Children can be divided into groups. Each group possesses a container for word cards and gets a mm, about twice a week, to talk about a topic and dictate some sentences which the teacher writes on the black board for them. The key words are given to them on cards, which they practice reading amongst themselves and make up sentences. Peer group interaction is very helpful for mentally retarded children and teacher appreciates their work wherever necessary.

ANALYSIS

Analysis is essential for drawing out valuable conclusion. In this study comparison between scores in Pre-test and final test and average performance in Pre test and final test are taken into account which implies reliable and valuable conclusion.

Techniques of analysis

Firstly find out the total for six areas separately and total score of each student. The score obtained by each student under an area was examined. On the basis of the performance a total score for each area was arrived. This was meant to suggest which of the aspect required more attention for mentally retarded children to make the learning effective.

Scoring Procedure

The observation schedule was given on five point scale for convenience of comparison and analysis. Rate the statement on a five point scale. A = Independent, B = Clueing, C = Verbal prompting, D = Physical prompting, E = Totally dependent. For the purpose of quantification the values 5,4,3,2,1 respectively were allotted to the grade A, B, C, D, E. The total score point for each aspect was arrived by scoring all the 34 student observation schedules. The total performance score point is converted into average performance score.

Table 2: Average Performance in Different Skills

S. No.	Different Skills	PRE-TEST		FINAL-TEST	
		Total Performance Score	Average Performance Score	Total Performance Score	Average Performance
1.	Language Skills	446	13.1	789	23.2
2.	Motor Skills	471	13.9	837	24.1
3.	Reading and Writing Skills	522	15.4	788	23.2
4.	Numerical Skills	493	14.5	770	22.5
5.	Social and Domestic Skills	453	13.3	790	23.2
6.	Aesthetic Skills	487	14.3	781	22.9

From the above table it is clear that language skills in the final test is nearly twice to that of the pre test. All other skills in final test are very high compared to pre test. In short performance of mentally retarded children in the final test is distinctly high.

CONCLUSIONS AND SUGGESTIONS

Through these types of creative activities, action songs, play and games, child gains self confidence, self reliance, initiative and independence. Improvements have taken place through repetition, over learning, peer modeling, perceptual training, motor co-ordination training, language enrichment and personality building programmes, beside school intervention. Presentations of learning material using concrete pictorial and symbolic sequences and planned interventions in all areas of behaviour. Above all the child makes his/her most important interpersonal contact with his/her peers. The child first learns to curb his will voluntarily in the interest

of another, to accept orders from others, to conform to group decisions, to give and take services and to share.

The result of this study showed that using of well planned and specially designed readiness strategies continuously the basic skills also can be developed and it will enhance the mentally retarded children's learning effectiveness can be best ensured. The variation of readiness skill is highly positive. The study also revealed that teaching strategies for mentally retarded children were found more effective. The development of basic skills of mentally retarded children leads to effective learning. The areas of independent living skills, practical skills, physical education, yoga, music, work experience, aesthetic skills, numerical ability, communication skills, social and domestic skills can also be included in curriculum. The curriculum should be revised and reviewed as per the needs of mentally retarded children.

THE MAJOR FINDINGS

- Through readiness skills, the skills not being taught but caught through different creative activities, play games and action songs etc, successful class room integration can be achieved.
- Identifying Reading the child needs for training in visual discrimination, auditory discrimination, observation and memory, sequence and development vocabulary (readiness skills) is necessary before he/she can actually read the text.
- Providing the children with opportunities for direct sensory contact for manipulating
- Real object or relating learning experience to real life situations.
- Grouping the pupil into almost homogeneous group and adopt gifted one as their leader.
- Selection of methods and techniques should be depend upon the ability of each and every individual.

SUGGESTIONS

- The teacher must asses the change of attitudes among peer groups and develop appropriate attitude among non retarded children.
- Shaping and allowing appropriate interaction experiences among students with and without handicap by the class room teacher is essential.
- Individual attention should be given by the teachers.
- In-service course should be given from time to time to teachers and a session for preparation of readiness skills should also be included in it.
- Timely evaluation by the evaluation committee for both the teaching and learning process should be in place.
- Teacher must examine the needs of the child and provide support during learning experiences.

REFERENCES

- Prof. K.C.Panda, Education of Exceptional Children
- Zakiya Kurrien, Helping the Children Learn
- State Education Institute, Thiruvananthapuram, A common activity programme for pre-primary Text book for Std. I and II
- SCERT, DPEP calling, A DPEP News letter.

EFFECTIVENESS OF PEER GROUP INTERACTION IN ENHANCING THE ACHIEVEMENT LEVEL OF CHILDREN WITH SPECIAL NEEDS

Sh. C. Karupppaiyan*

Abstract

The research study was undertaken with two main objectives in view; i) to develop Peer Group Interaction Strategy to enhance the achievement level of primary school children of class V in science, and ii) to study about the extent to which this strategy is useful in enhancing the achievement level of students in science. It was observed that the achievement level of Children with Special Needs in primary school is not appreciable in science subject. There is no remedial and feedback teaching to improve the achievement level of slow learners and Children With Special Needs in science subject. Keeping these factors in mind the investigator has developed a Peer Group Interaction Strategy to enhance the achievement level of Children with Special Needs in science subject. In Peer Group Interaction Strategy the teacher taught a particular competency in science of class V to the students. The next day, the teacher instructed all the students to sit in groups of six members in each group. A leader was nominated to each group. Then the teacher wrote the questions related to the competency in science taught by him the previous day. The leaders were instructed to ask the answer for the first question to his or her group members one by one in order. The first question was to be addressed to all members of the group. If any could not answer he or she would be given a chance to answer that question at the end. This process was repeated for teaching other competencies in science of class V. Primary school children including Children With Special Needs of class V in selected Panchayat Union Primary Schools in Thiruvannamalai District were taken as sample for this study. They were divided into two groups namely control group and experimental group. The subject science of class V was taught to the students of control group through the traditional method while the students of experimental group were taught the science subject of class V through the application of Peer Group Interaction Strategy. Post-test was conducted to both control group and experimental

group. The obtained results showed that the Peer Group Interaction Strategy is more effective than the traditional method in enhancing the achievement level of the Children With Special Needs and slow learners in science of class V. As this strategy is very simple, no cost involved and easy to handle, each and every primary school teacher can utilize this strategy to enhance the achievement level of the students, class and school as a whole in science subject. This Peer Group Interaction Strategy can be employed with respect to other subject as well and to all standards of education to enhance the achievement level of Children with Special Needs and slow learners.

STATEMENT OF THE STUDY

EFFECTIVENESS OF PEER GROUP INTERACTION IN ENHANCING THE ACHIEVEMENT LEVEL OF CHILDREN WITH SPECIAL NEEDS IN SCIENCE OF CLASS V

INTRODUCTION

The Primary Education is the foundation of all Higher Education. The MLL Strategies laid more emphasis to give importance to each and every stage of elementary education to educate the children to attain mastery level with equity. The objectives of SSA can be realized only, if all children including the children with Special Needs are included under the ambit of elementary education. SSA ensures that every child with special Needs irrespective of kind, category and degree of disability, be provided meaningful and quality education. To improve the quality of primary education to Children With Special Needs more and more researches are in urgent need.

REVIEW OF THE RELATED LITERATURE

The problem that every educator invariably encounters in teaching every subject at every grade level of our educational system is how to teach a lesson to a class that consists of students with different skills, learning rates and learning styles. Accommodating instruction to student differences is one of the most fundamental problems and the foremost task of any teacher. The problem of accommodating instruction to individual differences is so important that many educators have subtly suggested that instruction be completely individualized so that every student can work independently at his or her own rate. The students who are generally unable to cope with the work normally expected of their age group are called slow learners. These students with less than I.Q 90 are traditionally labeled "Dull Normal" and they are generally slower to catch on to whatever is being taught if it involves symbolic, abstract or conceptual subject matter. But it is really not that they learn so slowly as that they lag behind in developmental readiness to grasp the concepts that are within easy reach of majority of their age

mates. Such children will eventually grasp these basic concepts or subject fairly easily but about a year or two later than their age mates (Jenson, 1980). They lack concentration, retention and abstract thinking. As a result they find it very difficult to keep up with their age group. These slow learners constitute such a considerable percentage of student population that they cannot be ignored. For the qualitative improvement of primary education National Policy of Education 1986 recommended that Minimum Levels of Learning be laid down for each stage of Primary Education and that steps be undertaken to engage students to achieve these MLL. The focus of MLL approach is at mastery of competencies with equity. In MLL strategies competency serves as a basis for selecting and arranging appropriate teaching learning activities for learners where proper care is to be given to each and every child in a lively classroom situation. It is not an easy task for the primary school teachers as most of them understand teaching as imparting the content of the text-book regardless of whether the child learns or not. Hence for the qualitative improvement of primary education, proper care should be given to impart training to primary teacher to know how to utilize local resources to develop competencies among the students, as today more emphasis is given to experience than knowledge. To create proper experience among the students now teachers should be neither fact grinders nor examination oriented but they should be the creators, leaders, planners, organizers and guides of society in which children may learn the art of living. special instructional strategy for the slow learners. This warrants a special instructional strategy for the slow learners.

BACKGROUND AND NEED FOR THE STUDY

The performance of students in Mathematics at all levels of Education is not 'encouraging. In many schools chalk and talk method is still followed. The students are made passive listeners. There is no provision for Remedial and Feedback teaching to the slow learners to cope with normal students. Many teachers do not know the art of involving the students in the teaching learning process. Keeping these factors in mind the investigators developed a "Peer Group Interaction Strategy" to enhance the achievement level of slow learners in Mathematics at Primary Level.

OBJECTIVES OF THE STUDY

- To measure the effectiveness of Peer Group Interaction to enhance achievement level of students in Mathematics.
- To provide Remedial and Feedback teaching in Mathematics to the slow learners with the help of fast learners.
- To provide opportunities to the children to attain mastery level in mathematics.

HYPOTHESES

- There exists no significant difference between the pre-test and post-test mean score of the Control Group when Mathematics is taught through the traditional chalk and talk method.

- There exists significant difference between the pre-test and post-test mean score of Experimental Group when Mathematics is taught through the application of Peer Group Interaction Strategy.
- There exists significant difference between the post-test mean scores of the Control Group and the Experimental Group.

METHODOLOGY

The various steps involved in the methodology of the studies were the development of Peer Group Interaction Strategy for teaching Multiplication in Mathematics to children of class V, identification of slow learners, design of sample, construction of research tool, administering research tools, collection of data and employing appropriate statistical techniques to arrive at scientific conclusion.

DEVELOPMENT OF STRATEGY

The following steps were taken in the Peer Group Interaction Strategy. The competencies Solar System, Simple Machine and Pressure in Science of Class V were selected for this research project. The teacher taught the Solar system to the students. On the next day the teacher wrote five questions related to the competency solar system on the black board. On the following day teacher instructed all the students to sit in groups of six members in each group. Then the teacher nominated a leader to each group. The teacher instructed the leaders to ask for the answer for the first question to his or her group members one by one in order. The answer for the first question was checked with all members of the group. If anyone was not able to answer that question he or she would be given a chance to answer that question at the end. This process was repeated for teaching other competencies in science of class V

SAMPLE

For the purpose of this experimental study 16 Primary School Children With Special Needs of Class V in eight Elementary Schools in Kilpennathur Block in Thiruvannamalai District of Tamil Nadu were selected as sample.

CONSTRUCTION OF TOOL

To measure the performance of the students before and after the experiment achievement tests were conducted by the investigators on the basis of item analysis. The content validity of the tool by experts and item validity by item analysis was established.

PROCEDURE

The Children With Special Needs were identified. They were divided into two groups. The control group was taught Science Subject of class V though the traditional chalk and talk method while the experimental group was

taught Science subject of class V through the application of "Peer Group Interaction Strategy".

The Peer Group Interaction Strategy for teaching science subject to the students of class V was introduced and explained to the teachers in the selected Primary and Middle Schools in Thiruvannamalai District.

This strategy was employed for the benefit of the students through the class teachers. The post-test was conducted to both control and experimental groups at the end of the experimental period of two months.

SCORING PROCEDURE

The achievement test consisted of twenty objective questions. These test items were selected on the basis of item analysis. The total score was 20. For each correct answer the score was one and for each wrong answer the score was zero.

DATA COLLECTION

The experiment was conducted for a period of two months. At the end of the experimental period post-test was conducted to both the control group and the experimental group. The responses given by the students of control group and experimental group in pre-test and post-test formed the vital data required for the analysis.

STATISTICAL TECHNIQUES USED IN THE STUDY

The obtained data were analyzed by using appropriate statistical techniques such as Mean, Standard Deviation and t-Value to arrive at scientific conclusions.

FINDINGS AND CONCLUSION

Eight Panchayat Union Primary Schools in Kilpennathur were selected as sample for this project in Kilpennathur Block. Eight Fifth Standard Children With Special Needs from Panchayat Union Primary Schools in Vettavalum (East) Avur Muslim School, Konalur and Pollakunam were selected as control group while Eight Children With Special Needs of fifth standard from Panchayat Union Primary Schools in Kolathur, Karungalikuppam, Rajathoppu and Kazhikulam were selected as experimental group

Table-1 shows the pre-test and post-test score analysis of the V Std. Children of Special Needs of Panchayat Union Primary Schools, Kilpennathur Block (Control Group)

Name of the Test	N	Mean	S.D	t- Value
Pre-test	8	6.0	2.4	
Post-test	8	7.0	3.2	0.7071 **

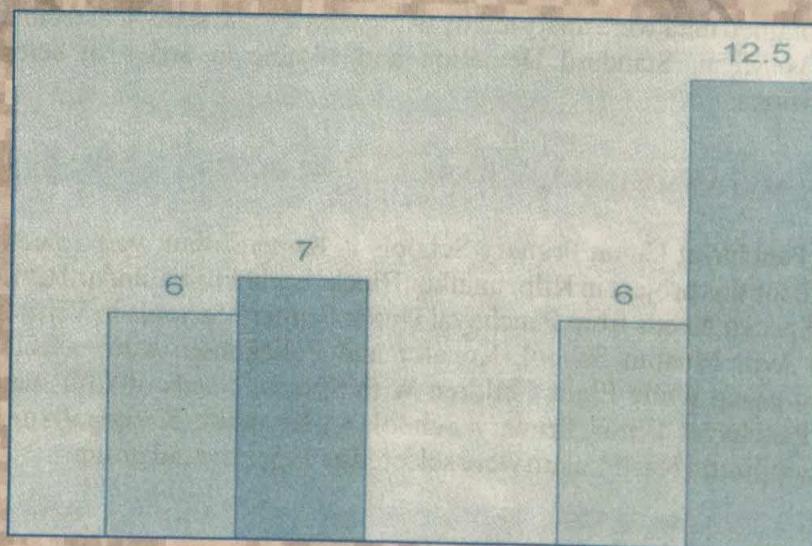
Note: ** denote the significance at 0.01 level. Improvement is 16.7%.

Table 2 shows the pre-test and post-test score analysis of the V Std. Children of Special Needs of Panchayat Union Primary Schools, Kilpennathur Block (Experimental Group)

Name of the Test	N	Mean	S.D	t- Value
Pre-test	8	6.0	2.6	
Post-test	8	12.5	3.4	4.2952 **

Note: ** denote the significance at 0.01 level. Improvement is 108%.

Mean Score Analysis of the Control Group and Experimental Group



The rate of progress made by the experimental group Children With Special Needs is higher than that of the control group Children With Special Needs. In terms of percentage, the rate of progress made by the experimental group

slow learners is 108% while the rate of progress made by the control group only 16.7%. The variations in the rate of progress made by both the groups is the resultant product of the implication of this Peer Group Interaction Strategy in teaching science subject to Children With Special Needs to enhance their achievement level in Science.

EDUCATIONAL IMPLICATIONS

- The role of Peer Group Interaction Strategy in Group Revision of competencies in Science to the Children With Special Needs is more effective than the traditional lecture method in enhancing their achievement in science.
- All the children can involve in this Peer Group Revision process.
- This strategy can help the primary school teachers to enhance the achievement level of the Children With Special Needs and slow learners in Science.
- This strategy makes children fearless and joyful.
- This strategy can save the time and energy of the primary school teachers.
- This Learner Centered Approach can minimize the wastage and stagnation in classroom teaching of Science.
- This strategy can help the teachers in Non-Formal Education Centers, Adult Education Centers, Education Guaranteed Scheme Centers, Alternative and Innovative Education Centers and in Special Schools to enhance the achievement level of their students in Science.
- Teachers can also utilize this Peer Group Interaction strategy in multi-grade teaching.
- This strategy can inspire Children With Special Needs and slow learners to cope with normal students to a considerable extent.
- As this strategy is employable with no cost, each and every school can utilize this strategy for providing remedial and feedback teaching to the Children with Special Needs and slow learners to enhance their achievement level in Science.
- This strategy can be employed in teaching all subjects and at all standards to enhance the achievement level of Children With Special Needs.
- This strategy can minimize the dropout rate and maximize the retention rate.
- This strategy can help the students to revise the portions in science and also to clear their doubts in the absence of teachers.

This strategy can develop co-operative attitude among the students in the classroom.

REFERENCES

- Arora , G.L., Child Centered Education for Learning without Burden, Krishna publishing Company, Gurgaon (Haryana).

- Awarded Paper of Department of T.E. & Extension, Innovative Experiments and Practices in Teacher Education, N.C.E.R.T., New Delhi, March 1994
- Development of Education in India 1993-94, Education for all by 2000 A.D., M.H.R.D., Government of India, New Delhi, 1994.
- Government of India, 1996, Education and National Development, Ministry of Education, New Delhi
- Government of India, 1986, National Policy on Education, Ministry of Education, New Delhi
- JOHN W.BEST & JAMES V.KAHN, Research in Education, Prentice-Hall of India Private Limited, New Delhi, 1995.
- Journal of Education, N.C.E.R.T., August 1997.
- M.H.R.D., Minimum Level of Learning, Government of India, New Delhi
- N.C.E.R.T., Though on Education, Regional College of Education, Mysore, N.C.E.R.T., New Delhi

SCHEMATIC SKETCH OF THE CHALLENGES AND SUGGESTIONS FOR THE EDUCATION OF CHILDREN WITH SPECIAL NEEDS

Ms. V. Mrunalini

Abstract

This paper tries to invite the attention to the practical difficulties and possible solutions of children with special needs. The author spells out the need for a system by discussing the strengths and lacunae of the present systems. The goal 'Education for All' can be realized if and only if the severe and profound categories of children are brought into the manpower development process of the country. There is a need to draw the boundaries and sketch up the curriculum exhaustively to meet the individual needs. The preparation of master plan including lesson plans and teaching materials to follow, copy and make use of; the need for exclusive, multidisciplinary expert teams to coordinate the efforts, bring in a system through which the individual challenges are discussed nationwide to generate solutions, exchange ideas; the need provide a platform to work cooperatively. The needs of the teacher preparation and modifications in the objectives of in service training are discussed in detail.

INTRODUCTION

Special educational services in India are gaining significance to strengthen the manpower of the nation. Though we have provision for the education for all citizens of India in our Directive Principles of State Policy, we have attached greater significance to it through Persons With Disabilities Act, 1995. This has awakened the policy framers to focus on this particular group. The need has arisen to be professional in nature to deliver quality education. The emergence of Rehabilitation Council of India, 1992 has built bones to this professionalism. There is a very big paradigm shift taking place at the government level. The jurisdiction of these services are changed from Ministry of Social Welfare to Social Justice and Empowerment, as we thought it is no more a welfare activity rather a facilitating activity to ensure that the rights of the Children With Special Needs are enjoyed to the fullest possible extent since they posses different abilities, and an optimistic, realistic view to build upon their strengths.

PHILOSOPHY OF INCLUSIVE EDUCATION

Providing education to the Children With Special Needs in a least restrictive environment in the mainstream of education is what inclusive education aims at. Theoretically it calls for no attention from the professional side. We have real evidences to prove this philosophy. We all know that the education of the Children With Special Needs in India has gained professionalism only in recent years. We find number of people who were educated in the normal systems in spite of their disabilities prior to the introduction of special educational services. That may be due to the efforts of the committed teachers, the intelligence of the child, exceptional common sense, efforts of the parents etc. It should be noted that they are exceptional. But today we have a number of constraints, mainly the quantity of schools and teachers have increased after 1980s especially by intensive planning and implementation of various schemes. Similarly the objectives, pattern of dissemination, quality of education, demands and requirements of the teachers have changed. Even in the mainstream education the individuality of the child is very much focused upon. The needs of the individuals with disabilities are varied, to be clearer; their abilities are different that they need alternate systems and specially designed opportunity models to express their abilities. Therefore, inclusive education today demands lots of efforts from the professionals. That is why SSA has built in structure for teacher training, material development and resource mobilization.

IMPLICATIONS OF PWD ACT, 1995

The PWD Act ensures equal participation and declares protection of the rights of persons with disability. There are provisions to establish and maintain special schools for them at district levels. It also introduces a two tier monitoring system at the State and Central levels through State and Central Commissioners. In practice we have travelled a few kilometers only, still we have a long way to go. Meanwhile the introduction of SSA has helped to travel with zeal.

THE STRENGTHS OF SSA

Goals are built in that they guarantee education for the Children With Special Needs, concept of alternate school, and 'back-to-school' camp have also created a lot of awareness. The other strengths are discussed here under

- Focus on elementary education of satisfactory quality with emphasis on education for life.
- Bridge all gender and social category gaps at primary stage.
- Universal retention by 2010.
- State Central collaboration
- Great pool of finance
- Lot of networking

- In-service teacher training
- Block resource centers
- Flexible, micro level planning
- A special education teacher at block levels
- Mobilization of local resources
- Awareness campaigns
- Establishment of new system that involves the community

In order to strengthen the education of the Children With Special Needs, the following measures can be taken into consideration. To have a clearer picture of the ideas, the basic concepts and their relevance to the particular Challenges are given.

CONCEPT #1

EARLY INTERVENTION

The fundamental problem of the Children With Special Needs is the delay in the developmental milestones. The early intervention would help significantly to ensure total rehabilitation. Early intervention fosters development thus lessening delay in developmental milestones. Further decay and secondary handicaps are prevented. Timely identification and treatment lays foundation for a lifetime. Parents and other family members can be educated early. The body and minds of young children are more flexible to be moulded.

The early intervention should start as early as the problem is detected. It can even be from day one the child is born or even before that when we suspect the mothers at risk to get children with disabilities, by preparing them psychologically and cognitively. The incidence of disability can be compared to an accident and we, the rehabilitation professionals should work like a doctor in the Intensive Care Unit to ensure that the fullest potential is drawn out for the person with disability to lead an independent life. Moreover the early intervention will serve the need for preparation before integration especially in the cases of children with auditory challenges.

Problem

We do not have systems to look into the needs of early intervention. When we think of education for a child, we wait till the child completes 6 years (primary school) or at least some 2 years in anganwadis and balwadis. The anganwadis and balwadis workers are given short term training to look after the needs of the children in many of the places in the country. There are less than adequate facilities in anganwadis to accommodate the needs of the Children With Special Needs but still monitoring mechanisms in terms of expert teams are not available. Moreover early intervention requires lot of skills and professional expertise. The short term training programmes are not sufficient.

Solutions

- Establishing special anganwadis with specially trained teachers with specializations in each disability area can be a solution. The PHC doctors training can be strengthened to ensure early detection and clinical intervention.
- Each district can have a team of experts consisting of specially trained doctors, paramedical professionals and rehabilitation professionals

CONCEPT #2

DIVERSIFIED NEEDS

We are in the modern era giving child centered education. The needs and demands of these children are so heterogeneous that they can rarely be grouped. Already PWD act speaks about 7 categories while the professionals feel that the act has not included Autism, Learning Disability and Multiple Disabilities. Especially we shall see that the multiple disabilities group differs to a wider range. Apart from these, we have number of differences even in so-called homogeneous groups viz HI, MR, etc.

Problem

One teacher and one master curriculum cannot cater to the diversified needs. We need to adopt different strategies to reach each child. Each individual is different from one another. Once we feed anything into the machine, we shall be sure of the process and the outcome, but in the case of human beings the outcome cannot be anticipated that easily.

Solution

- Preparation of master plans including lesson plans with flexible parameters to meet the diversified needs. Vast pool of materials and resources will have to be collected and modified. Ready-made materials for the soft skills like strategies to follow, tips to disseminate education shall be prepared by a team and shall remain at the national level and keep on revising and refining as and when required.
- Number of master teams shall be established to cater to the various needs of the groups of children with
 - i Hearing Impairment
 - ii Mental Retardation
 - iii Cerebral Palsy
 - iv Loco motor Impairment
 - v Visual Impairment
 - vi Visual Impairment and Hearing Impairment

- vii Hearing Impairment and Mental Retardation
- viii Mental retardation and Visual Impairment
- ix Visual impairment and loco motor Impairment
- x Hearing Impairment and loco motor Impairment
- xi Mental Retardation and loco motor Impairment
- xii Cerebral Palsy and Mental Retardation
- xiii Cerebral Palsy and Visual Impairment
- xiv Cerebral Palsy and Hearing Impairment
- xv Autism

These groups shall be established in the existing National Institutes themselves and the experts in service can be deputed to meet the manpower requirements. The teams shall consist of one or more representatives from the existing special schools that have success formulae. The Collector's office or the office of the District Disability Rehabilitation Officer can be linked with using intranet technologies to serve the teachers. Later it can be extended to the schools.

The team shall carry out research works, and do case studies. The success stories can be recorded to train the teachers, which will also serve as an example for teachers to handle such children.

CONCEPT #3

MODELSCHOOLS

Any teacher training programme is given due recognition if and only if it has got a model school. The model school's role in the teacher education is well known to all of us. Unless and until we have an example system it is very difficult to follow. Even our Constitution has copied, adopted and modified the existing legislative procedures from other countries.

Problem

We have limited number of schools with good systems and practices. Many schools are unknown to the remaining parts of the country. There are few recorded histories in terms of good practices. More over, the different social climates of the country require different models at least one for rural and one for urban in each state. There are states with no special schools for certain categories at all.

Solution

1. Existing schools with good practices and outcomes can be declared as model schools.
2. New National Model schools and State Model schools can be opened

3. The model schools can be networked with state and central government intranets to enable each and every teacher to look into those schools.
4. The nodal centers recognized under Right to Information Act can also serve as an information center for parents, they can have video graphs of these school proceedings.

CONCEPT #4

AWARENESS

Education and awareness of the public are inseparable components in the education and rehabilitation of the persons with disabilities. Awareness leads to education, advocacy, proper selection of methods and materials. Awareness is required for all the groups of people who come in contact with the Children With Special Needs, the society, parents, family members, teachers (both regular and special), and the Children With Special Needs themselves.

Problem

The awareness programmes are less in number. The parents are not aware of the services that are available. The theoretical doctor shopping happens to continue till date. The proper remedies are not given to the Challenges of the Children With Special Needs. At times they are misleading also. There is a great demand on the part of the teachers to acquaint themselves with the recent technological inventions and also in handling Challenges in the classroom.

Solution

1. More number of awareness programmes can be generated, expanded and extended.
2. The Primary Health Centers (PHC) and anganwadies can be strengthened with supply of materials on awareness. A compilation of local information can be done and special orientation on the local scenario be given to the PHC and anganwadies.
3. Every district Disability Rehabilitation Office shall network with the local NGOs and philanthropists and work as a central point of information.

CONCEPT #5

TEACHER PREPARATION CONCEPT

Teachers build the pillars of the society. Teacher education and training is a profession of its own kind. Unlike any other science degrees, it concentrates upon skill building activities. The skill training bridges the gap between theory and practice. We train different teachers for different subjects

differently to cope with the nature of that particular subject. Many a time teacher preparation curriculums for different subjects may look similar but they vary in their thrust areas. Teachers are also given a lot of in-service, refresher courses to update their practices.

Problem

We do not have enough number of trained teachers. The teacher training component of different disability areas differ in their subject matters and skill training. We have limited courses and the SSA provides only one block resource teacher to look after all the Children With Special Needs in that block.

Solution

1. Multi disciplinary teachers can be prepared. In that case, the time limit of one year B.Ed course is not sufficient.
2. Courses involving 3 to 4 years right from the degree level catering to the needs of the various groups of the Children With Special Needs can be encouraged.
For example, the B.Sc (Special Education/ Maths/Physics), B.Ed (Special Education/Maths/Physics), M.Ed (Special Education) five year integrated course at Avinashilingam Deemed University, Coimbatore, Tamilnadu. Previously the course was meant for all the handicapping conditions from B.Sc to M.Ed. But today, from B.Ed onwards it is restricted to the education of the Visually Impaired. The old model would be a better example as it included all kinds of exceptional people including the Gifted.
3. When we think that we cannot spend much time, we shall simultaneously increase the courses preparing teachers for different categories.

CONCLUSION

SSA is definitely doing a lot of work in shaping the nation in terms of education for all. We shall always build upon the strengths to overcome the difficulties. The solutions discussed in this paper may be refined through jury opinion and research works. With the coordinated efforts of the committed team, we hope for a bright future.

REFERENCES

- Education for all: the Indian Scene, New Delhi, Dept of Education, Ministry of HRD, Govt of India, 19932.
- K.C.Kundu, Status of Disability in India-2000, RCI
- Handbook for the teachers of the Visually Handicapped, NCERT, 1992.

TEACHER EDUCATION PROGRAMME FOR THE CHILDREN WITH SPECIAL NEEDS AN EXPERIMENT FOR BLIND TEACHERS

Sh. Prassanna Mukherjee

Every Indian wants India to be not only a literate but also an educated country. Every Indian child deserves an equal opportunity to build a good life. I am confident it will be achieved sooner or later under SSA.

So far, to make the blind children read the braille script, to write to calculate to use the braille frame these are being carried out by the blind teachers through oral instructions. But we cannot attain the main goals of education through this method, with the help of sight it would be much more useful. When we touch substances and feel the contours along with oral instruction.

Similarly, the shape and size of objects can be taught. We can see the difference here between the blind teachers and teachers having sight, in our training Mr. Bhupendra Singh Dimar. I consulted with him to decide my role for him. He told that there is only text book provided for them nothing else. There is no teaching learning material available. So I thought that I have to develop many T.L.M. for him suitable training is necessary so that he can make his own T.L.M. in his school.

Objectives of the project

Here the teacher is blind and students are normal.

- To enable the teacher to learn about the shape and size of the objects.
- Children can participate actively in learning programme.
- It develops thinking and imagination in teachers and children.
- Helps in the formation of real life situation and clear concepts.

Methodology

- For science plastic raised charts bought from market used, then made cutouts out of it. He was made to feel each source of vitamins. He was asked and tried to keep in mind whatever experience he got. I gave oral description also. Doubts were cleared by making them feel again and again. Two cut outs of different vitamins were compared. This experiment went with different cutouts like A, B, B2, B3, B6, B12, C, D, E and K.

Later the name of the vitamins got inscribed through brailier.

- Teaching English Prose: William Tell
- An interesting story of William Tell presented in sentence strips. This story was divided into small chunks and got written in Braille also. So

that students may be able to see the sentences on strip and with the help of blind teacher can read and comprehend it.

Essential Objects List approximate price in Rs.

1. Chart papers	-3	$3 \times 4 = 12/-$
2. Cello tape	-1	$1 \times 15 = 15/-$
3. Bharu	-1	$1 = 15/-$
4. Ink	-1	$1 = 20/-$
5. Piece of Hard board	-	free of cost

Method of making sentence strips

1. Make 5 equal pieces of chart paper
2. Write sentence with 'special pen' and brailler.
3. Stick the cello tape half in the chart paper and half in the base board
4. Make a cover page.

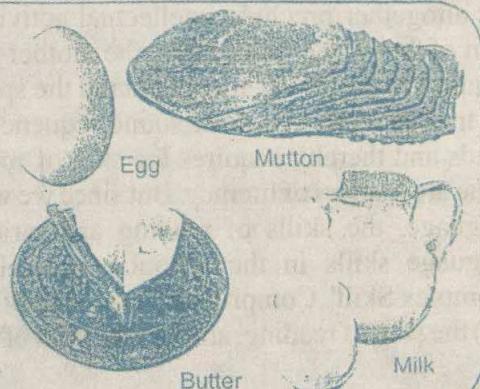
Importance

The general principles involved in sentence strip programme in the teaching of reading through listening and speaking. The children are encouraged to speak and their speech is converted into printed text as the blind teacher tells the story and later they reconstruct that printed text immediately back into speech as they read along with the teacher. The motivation for reading is very high in such an exercise. It is also my pride that visiting honorable members of MHRD visited and witnessed this presentation at Pendra this year.

VITAMIN B₁₂

Required for:

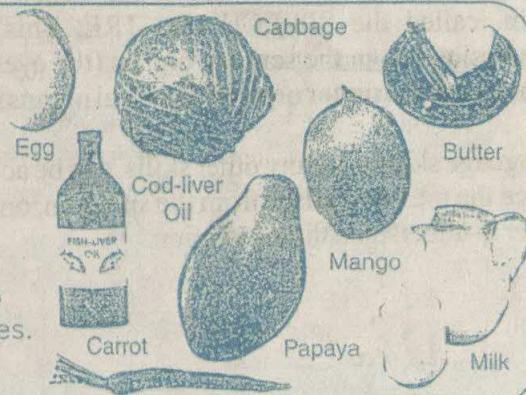
Replacement of cells, maintenance of the Myelin sheath which insulates nerve fibres. Deficiency can result in defective production of red blood cells and possible degeneration of the nervous system.



VITAMIN A

Required for:

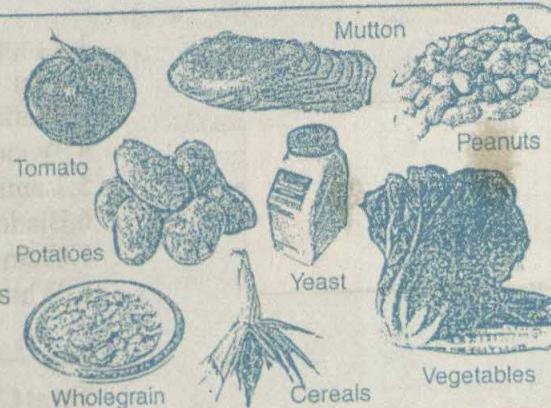
Growth, healthy eyes and skin. Fights infections. Lack of Vitamin A in the diet leads to various eye diseases.



VITAMIN B₃

Required for:

Production of energy and a healthy skin. Absence of Vitamin B₃ leads to disease PELLAGRA.



“Story with Complex Skill”

A way to develop the four skills of a child

Language is often called a 'Skill' rather than a 'Subject'. Though a skill does not altogether preclude intellectual activity, it is more a matter of 'doing' than of 'knowing'. In learning the mother tongue, the first skill that a child acquires is the ability to understand the spoken word - the skill of listening. He tries to reproduce these sound sequences to express his own desires and needs and thereby acquires the skill of speaking. The abilities to read and write are matters of literacy. But since we want our pupils to be literate in the language, the skills of reading and writing are also included as basic language skills in the school course. Language is therefore called a 'Complex Skill'. Comprising (i) the skill of listening (ii) the skill of speaking (iii) the skill of reading, and (iv) the skill of writing.

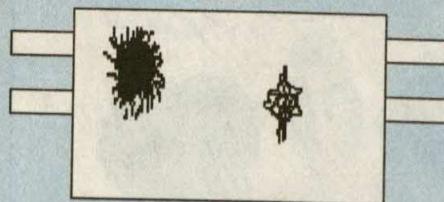
Skill involves the use of sensory motor organs, but an individual learner may not be equally at home in the use of all these organs. Scientists have also proved that language learning is associated with a particular area of the brain, called the SPEECH CENTRE. This centre receives and stores impressions from the sensory organs (the eyes and the ears) and sends out impulses to the motor organs (the vocal organs and the finger muscles).

Language skills, like any other skills, can be acquired only through practice. Since the meaning arises from the situation, one has to grasp the situation in order to understand the expression.

Educational Instrument

- for story objects

Essential objects



1. Empty shoe box	No cost
2. Chart papers 4 x 2	8/-
3. Marker pens 4 x 20	80/-
4. Wooden stick	No cost
5. Lamination film	20/-
6. Blade	6/-
7. Gum	10/-
8. White paper	2/-

Total Cost 126/-

Method of preparing this equipment:

- First draw 6" x 6" radium in the centre of the box and cut it, make 4 holes for wooden sticks.
- Cut chart paper into 5" role.
- Made some pictures of the story with the title "Who am I"?
- Write the whole story with situational pictures according to the story.
- For comprehension give some questions relating to skills.
- Paste lamination film on chart papers.
- Now pasted wooden sticks on both ends of the char paper and fixed in the box.

Use of equipment:

- With rotating the chart sheet we see various pictures with the question "Who am I" Now ask the children to name the objects first and then make complete sentences. Thus presenting in the class we can develop the skill of listening and speaking.
- Again rotating further the whole story will be appear slowly with situational pictures. Teacher reads it and students follows. Rotating one by one every one gets equal opportunity to developing reading skills.

TLM for sounds of 'C'

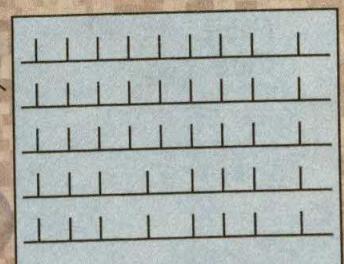
At present the students in rural areas of Chhattisgarh struggling with sounds of language. So teachers are working in mastering the languages, that is, to read and write independently in a very short time.

I experimented this innovative method with the sounds of 'C'; like /k/ and /s/ with a very old pocket board method.

Reason for the TLM: One of the teachers asked me that some times words started with 'C' sounds as /k/ while in another times it sounds like /s/. How can we teach out students with the reason.

Materials Used:

1. Pocket Board
2. Cards



Vowel A, E, I, O, U

1 set of capital letters and 4 set of small letters - 25

Consonants B.....Z

1 set of capital letters & 2 set small letters

-55

80

Costing

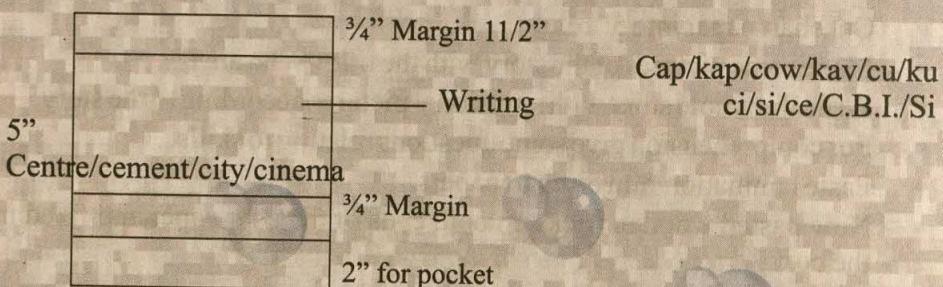
$4 \times 5 = 20/-$

ink = 20/-

Bharu = 5/-

= 35

Method for preparing cards: I took a drawing sheet and divided into 5" x 4" size 16 cards from 1 sheet.



Alphabet cards: Containing letters are a very useful TLM in teaching English. The letters in the cards should be sufficiently large so that when the teacher puts up a card the pupils on the last benches can read it without difficulty.

Pattern:

T- What letter is this?

C- 'C'/si/

T- Now you join with 'a' and read children

C- O.K.

C- a-Ca
Cable

Cabby
Cable
Café

Coast
Coat
Coca
Cock
Coffee

Cube
Cuckoo
Cue
Cuff
Cup
Curtain
Cut

Ceiling
Cell
Cement
Cent
Central

CIA
CBI
Cigar
Cinema
Civil
Civic

Methodology:

For reading look and say method can be used for ear training phonic word method is presented. Pupils can also practice word making, sentence making, by combining the parts written on these cards. They can also be used in teaching spelling by the technique of delayed copying.

Steps:

- Introducing alphabets from A to Z with sounds now start letter 'C' for cap, cat, cot, cut, on the other hand make words like.
Cinema/cinny/entre/cease/C.A./C.B.I./
Different vowels are given in the same manner but one at a time.
- Now, give the words of two alphabet sounds and ask them to spell it.
- Give the three letter words and ask them to spell it.
- Go for the four letter phonetic words in the same manner.
- Introduce all the speech sounds. Here joining (reading) and splitting (spelling) go side by side.

The English alphabet gives different sounds so the only way to master English is to read. Through this sound games children develop an interest to read and they can spell or read a word independently and with confidence later on they can make a rule through observation that 'C' sounds as /k/ when it pronounce with vowel *a*, *o* or *u* and sounds like /si/when 'C' as abbreviation or comes with vowels like *i* or *e*.

Findings

It is obvious that teachers with teaching learning material are more efficient while teaching in the classroom. When they develop or prepare TLM involving students it feels than with joy engage there classes also involving all the sense organs child will be enable to acquire quality education in regular schools.

In service teachers training are the best support for teachers. Children with special needs are still not in schools so more and more involvement of community and teachers must be go on to achieve objectives of S.S.A.

XXXXX

EDUCATION OF CHILDREN WITH SPECIAL NEEDS UNDER SARVA SHIKSHYA ABHIYAN A CHALLENGE

Dr. Manoj Kumar Dash

Abstract

The paper discusses the National and International commitments towards education of children with special needs as well as status of children with special needs in India under Sarva Shiksha Abhiyan (SSA). Findings show that about 1.40 million children with special needs are in regular schools at elementary level (NIEPA, 2005). With regard to a spontaneous integration of single class village school, there has only been a 'Tokenism' shown in respect of the children with special needs in regular schools. There is no guidelines for the functionaries associated with the education of Children With Special Needs in regular schools. It is the teachers, parents and community who can make inclusion go "Beyond Tokenism" into reality. In India inclusive education is not an option but a compulsion to reach out. Inclusion of these children demands a multi sensory instruction, in teaching in the general classroom. Inclusion of children with special needs in general classroom represents a challenge to our country. National and International efforts are being made to augment Inclusive Education Programme. Hence inclusion of children with special needs is back in terms of psycho-social development as well as academic and vocational development for the education and rehabilitation of Children with Special Needs in the society.

INTRODUCTION

Indian Society is naturally more inclusive than segregationist. Starting from Gurukul System to western model of day-care system efforts have been made to bring people in, rather than to keep them out. About 1.40 million (NIEPA, 2005) children with disabilities are in regular schools. So Govt. of India has to accelerate the new scheme of Inclusive Education to achieve the target of Education for All (EFA) by 2010. It is surprising to note that there is spontaneous integration in the single class village school, where all children learn together. There is no special schools, special teachers and special facilities. There has been only "Tokenism" shown to the children with Special Needs. Hence, it is essential to provide easy guidelines to

teachers in regular schools who can make inclusion go “Beyond Tokenism” into reality.

Environment in Integrated Education is very poor and the total coverage on Special School and integrated setting constitute less than 5 percent of children with Special Needs (Sixth All India Survey on Education, 1998). This clearly reflects the efficacy of Special Schools integrated education i.e. to be very honest the special schools and integrated education model are not able to provide access to all the children with Special Needs. The target –Education for All, can not be fruitful with exclusion of children with Special Needs.

INTERNATIONAL SCENARIO

In 1948, the Universal Declaration of Human Rights was adopted by United Nation General Assembly (1948) the declaration on the Rights of Disabled Persons (1975) was adopted later.

United Nations Economics and Social Commission for Asia-Pacific (UNESCAP, 1999) on education of Children with disabilities point out that while some significant progress has been made, there is a paucity of specific disability related data. The little that is available is also either unreliable or confusing, suggesting that much more remains to be done for a majority of disabled children.

The United Nation declared 1981 as the International Year of Disabled Persons. “Full participation with equality” was the theme of this programme. The World Declaration on Education for All and its framework for Action to meet basic learning needs (1990) states that “the learning needs of the disabled demand special attention. Steps need to be taken to provide equal access to education to every category of disabled persons as an integral part of the education system”.

The Economic and Social Commission for Asia and the pacific (ESCAP 1992) declared 1993-2002 as the Asian and Pacific decade for disabled persons. The Commission stated that the opportunity for all participants and equalities of people with disabilities, especially in the field of rehabilitation, education and employment, continues to be far less than those of their non disabled persons.

World Conference on Special Needs, education and the Salamanca statement and framework for action on special needs education (1994) focuses on the value of inclusive education for a majority of children with disabilities and to spell out guidelines for the implementation of such approach. It proposed that children with special educational needs must have access to regular schools.

In April 2000 (after ten years of the declaration on Education for All), it was focussed that “more than 113 million children have no access to primary education, 880 million adults are illiterate and gender discrimination continues.....” Among the 113 million children stated above, who are

deprived of their basic human right to education, disabled children comprised the higher proportion. It is estimated that "only 1 in every 50 children with disability has access to education" (UNICEF, 2000).

The Dakar framework for action (2000) of the world education forum resolve to achieve "Education for All" by 2015, to achieve this historical goal for the children with disabilities, '.....all states will be requested to develop or strengthen existing national plan of action. These plans must be transparent, democratic and involving various stakeholders like: Community leaders, parents, teachers, civil society and NGOs etc.

A number of international and national initiative have contributed significantly to the movement towards inclusive education in India.

NATIONAL INITIATIVES

The Indian Education Commission (1964-66) first suggested that the education of handicapped children has to be organized not merely on humanitarian grounds, but also an aspect of equity. The commission viewed that inspite of constitutional obligation on universal compulsory education for all, including children with disabilities, very little had been done in this regard. The Commission emphasized that the education of children with disability should be "an inseparable part of the general education system" The commission has also specifically emphasized the importance of integrated education in meeting this target as it is cost effective and useful in developing mutual understanding between children with and without disabilities.

Ministry of Social Justice and Empowerment, Govt. of India (1974), initiated the Integrated Education for Disabled Children (IEDC) programme to promote the integration of students with mild to moderate disabilities into regular schools. The State Governments were provided with financial assistance to implement this programme in regular schools. However, the programme could not achieve the desired result.

In 1968, Govt. of India formulated National Policy on Education for All Govt. Schools and articulated a need to integrate children with disabilities in regular schools.

National Policy on Education (NPE, 1986) emphasized that whenever feasible education of children with Special Needs (whose needs could be met) should be provided in regular schools; children who were already in special schools could be integrated into regular schools as soon as they acquired reasonable levels of daily living, communication and basic academic skills. It also emphasized on the need to restructure teacher training programme in order to prepare teachers to deal effectively with the children with Special Needs.

MHRD, Govt. of India (1987) in association with UNICEF and NCERT undertook "Project Integrated Education for the Disabled" (PIED). The aim of this project was to strengthen the implementation

of IEDC scheme all over the country.

District Primary Education Programme (DPEP, 1994) a centrally sponsored scheme aims to reduce overall dropout of children enrolled in primary classes, to raise their level of achievement and to provide primary education to all children, including children with disabilities.

The person with disabilities Act (PWD Act, 1995) indicates that although Govt. of India had made several attempts to implement integrated education programme, there is lack of a firm commitment to promote integration. It states that whenever possible, children with disabilities should be educated in regular school settings.

The Sarva Shiksha Abhiyan (SSA, 2001-02) is a mission which focuses on increasing access, enrolment and retention of children as well as improving the quality of education. The objectives of SSA can be revealed only, if all children including those with special needs are included under the ambit of elementary education. With adequate support services, CWSN can be provided quality education, in regular school.

INDIAN CONTEXT AN OVERVIEW

Problems of children with Special Needs are many in the society. It is a challenge to all concerned. Education of CWSN needs a thorough planning and effective implementation, so as to achieve the target and make inclusion possible in its real meaning.

Number of CWSN

Data in **Table – I** revealed that number (per 1000) of children having difficulties in speech is highest (with 77 in 1000 belonging to 0-4 years and 95 in 1000 belonging to 5-14 years) whereas the least is the number with regard to mentally retarded children. Similar is the situation with regard to distribution of children with special needs in rural and urban areas. The number of children with special needs in rural areas (237 in 1000 population) is more than that of urban areas (208 in 1000 population). It is estimated that about 445 children per 1000 population belonging to 0-14 years age belong to the category of children with Special Needs in one way or the other.

Table 1: Children with Special Needs (0-14 years) per 1000 population

Category of Disabled	Age (in years)	Total (Rural & Urban)	Rural	Urban
Visually Impaired(VI)	0-4	20	8	2
	5-14	39	17	22
	0-14	59	25	34
Hearing Impaired(HI)	0-4	16	09	07
	5-14	41	18	23

	0-14	57	27	30
Speech	0-4	77	42	35
	5-14	95	47	48
	0-14	172	89	83
Locomotors	0-4	50	29	21
	5-14	67	36	31
	0-14	117	65	52
Mentally Retarded (M.R.)	0-14	40	31	90
All (VI + HI, Speech, Locomotor, MR and Others)	0-4	163*	88*	75*
	5-14	242*	118*	124*
	0-14	445	237	208

Source: Disability Status in India, 2003. (Provisional)*

Enrolment of CWSN

Enrolment of CWSN is an important aspect of universalization of Quality Elementary Education and Education for All. Data from **Table II** shows that the enrolment of CWSN increased from 0.77 million in 2003 to 1.01 million in 2005 at primary level, whereas it was 0.20 million to 0.38 million at upper primary level during the same period.

Table II: Enrolment of Children with Special Needs at Primary and Upper Primary Level

(in million)

YEAR	AREA	PRIMARY LEVEL (I-V)			UPPER PRIMARY LEVEL (VI-VIII)		
		Total	Boys	Girls	Total	Boys	Girls
2003	Rural	0.68	0.41	0.27	0.16	0.10	0.06
	Urban	0.09	0.05	0.04	0.04	0.02	0.02
	Rural & Urban	0.77	0.46	0.31	0.20	0.12	0.08
2004	Rural	1.19	0.70	0.49	0.34	0.21	0.13
	Urban	0.15	0.09	0.06	0.07	0.04	0.03
	Rural & Urban	1.34	0.79	0.55	0.41	0.25	0.16
2005	Rural	0.89	0.53	0.30	0.26	0.16	0.10
	Urban	0.12	0.07	0.05	0.12	0.06	0.06
	Rural & Urban	1.01	0.60	0.41	0.38	0.22	0.16

Source: Analytical Report; NIEPA (2005)

Again, it is revealed from Table III that the enrolment of CWSN at elementary level during 2003 was 0.97 million which increase to 1.39million (over a period of three years) during 2005.

Table III: Enrolment of CWSN and Elementary Level

(In million)

Year	AREA	Elementary Level (I TO VIII)		
		Total	Boys	Girls
2003	Rural	0.84	0.51	0.33
	Urban	0.13	0.12	0.01
	Rural & Urban	0.97	0.63	0.31
2004	Rural	1.53	0.91	0.62
	Urban	0.22	0.13	0.09
	Rural & Urban	1.75	1.04	0.71
2005	Rural	1.15	0.69	0.46
	Urban	0.24	0.14	0.10
	Rural & Urban	1.39	0.83	0.56

Source : Analytical Report, NIEPA (2005)

Genderwise Enrolment of CWSN

As obtained from the above **Table II** enrolment of boys during 2003 was 0.46 million against girls, enrolment of 0.31 million at primary level whereas there is an increase in enrolment of boys to 0.60 million during 2004 (over a period of three years) against the girls, enrolment of 0.41 million. This shows that though the enrolment of boys and girls increased over a period of three years but number is more in case of boys than that of girls. Similar is the situation with regard to enrolment of children with special needs at upper primary level. It is seen from **Table III** presented above that enrolment of 0.59 million boys and 0.38 million of girls during 2003 is increased to 0.83 million boys and 0.56 million girls during 2005 at elementary level. This shows that with the special interventions of SSA, process of integration accelerated all around but still there is problems with regard to enrolment of girls which necessitates the role of teachers, parents, community and VECs in the light of integration of girls in regular schools.

Area wise enrolment of CWSN

As revealed from **Table II**, the enrolment of CWSN at primary level over a period of three years (2003-2005) is more in rural areas (0.89 million) than in urban areas (0.12 million). Similar is the situation in case of Upper Primary Level (i.e. rural = 0.16 – 0.26 million and urban = 0.04 – 0.12 million). With regard to area wise enrolment of children with special needs at elementary level, the enrolment during 2003 was more at rural areas (0.84

million) than in urban areas (0.13 million). Similar is the scenario during 2005 (rural enrolment 1.15 million and Urban enrolment 0.24 million) as well.

Nature of Disability:

From **Table IV** it is observed that at primary level, the highest percentage of enrolment of children with special needs (in 2005) belong to physically handicapped (34.85 percent); the next in order being and mentally retarded (18.44 percent) and the lowest percentage belong to hearing impaired (9.11 percent); whereas in case of upper primary level, 38.08 percent belong to physically handicapped and 6.25 percent belong to mentally retarded. This shows that though more and more mentally retarded children get enrolled at primary level, the rate of transition of the enrolled children to upper primary level gets reduced. These posses a challenge to the regular school system with regard to integrating children with special needs.

Table IV : Percent of Enrolment by Nature of Disability at Primary and Upper Primary Level

S.No.	Types Of Disabled	Primary Level (I to V)		Upper Primary Level (VI- VIII)		Elementary Level (1-VIII)	
		2004	2005	2004	2005	2004	2005
1.	VI	18.88	15.39	24.13	24.78	20.11	17.95
2.	HI	13.66	9.11	15.36	12.14	14.06	9.94
3.	Speech	16.46	13.82	14.71	11.71	16.05	13.24
4.	P.H.	30.71	34.85	30.73	38.08	31.65	35.73
5.	M.R.	12.76	18.44	4.71	6.25	10.78	15.12
6.	Other	7.52	8.39	6.37	7.04	7.25	8.02

Source: Analytical Report, NIEPA (2005)

Enrolment by nature of disability presented in **Table IV** shows that at elementary level (in 2005) 35.73 percent of children are physically handicapped and 9.94 percent of hearing impaired, which constitute the highest and lowest percent respectively among CWSN.

Gender Parity Index (GPI)

It was found from Table – V that the GPI as calculated for a period of 2003 to 2005 revealed that there is an increase in GPI and Girls, share of CWSN at

primary level had a GPI of 0.66 in 2003 and 0.68 in 2005 whereas in case of Upper Primary Level, it was 0.61 in 2003 and 0.71 in 2005. It is also noticed that at elementary level GPI was 0.65 in 2003 and 0.69 in 2005.

Table V: GPI at Primary Upper Primary and Elementary Level

YEAR	PRIMARY			UPPER PRIMARY			ELEMENTARY LEVEL		
	Rural	Urban	Rural & Urban	Rural	Urban	Rural & Urban	Rural	Urban	Rural & Urban
2003	0.65	0.71	0.66	0.58	0.71	0.61	0.64	0.71	0.65
2004	0.71	0.73	0.71	0.62	0.77	0.64	0.69	0.74	0.69
2005	0.67	0.74	0.68	0.65	0.86	0.71	0.66	0.80	0.69

Source : Analytical Report, NIEPA (2005)

Above analysis of data clearly indicates that boys outnumber girls at all levels i.e. primary, upper primary and elementary level as well, which is also revealed from the enrolment of girls.

Comparison of GPI from elementary to upper primary level revealed that higher dropout rate of girls with special needs are at elementary stage of education. Similar is the situation with regard to the comparison of girls, share in enrolment from upper primary to elementary level at urban areas. But the picture is slightly improved in rural areas.

Rate of enrolment of girls at rural areas is less than that of urban areas in case of CWSN though the scenario is improving from 2003 to 2005; but it is realized that still more and more special attention needs to be paid at rural areas so as to change the attitude of parents and community for improving shares of girl children with special needs to accelerate the target of EFA and UEE.

Enrolment of CWSN to Total Enrolment

Table VI shows the rate of enrolment of CWSN to total enrolment including normal children. It is revealed that at Primary Level the share of CWSN during 2003 was 0.88 percent which increased to 1.22 percent during 2004 and again reduced to 0.86 percent during 2005. Similar is the situation at upper primary level as well

Table VI: Percentage of Total Enrolment of Disability

Year	Primary Level	Upper Primary	Elementary
2003	0.88	0.87	—
2004	1.22	1.24	1.23
2005	0.86	1.01	0.90

Source: Analytical Report, NIEPA (2005)

It is also noticed that the picture is similar at elementary level. It is definitely alarming to review our school system with regard to physical facilities, curriculum, method of transaction, classroom process, school effectiveness as well as Community participation, Community mobilization, programmes for achieving the target of educating the children with Special Needs along with their normal counterparts.

CRITICAL DISCUSSION

Problems of children with special needs are many in the society. It is a challenge to the family, society, teachers, administrators as well as the institutional mechanism working in the field of education for all (EFA). The important barriers in the way of integrating children with Special Needs to our regular school are:

1. Physical barriers
(Stairs, doorways, toilets, water faucets and other architectural aspects imperative to accessing facilities in school)
2. Awareness on Ideology and Philosophy of Inclusion
3. Early childhood care and development
4. Inclusive Educational Input
5. Community Mobilization
6. Inclusive Ethos within schools

• Physical Barriers

It is related to physical facilities available in the regular schools to accommodate children with special needs. The basic physical features which block the education of CWSN are the stairs, doorways, toilets, water faucets, sitting arrangement etc. Therefore, it is essential to develop/create child friendly environment in and around the school.

• Ideology and Philosophy

It is essential to create awareness on the ideology and philosophy of inclusion. There are certain fundamental questions sticking to the mind: What is inclusive setup? Why do we need inclusion? What steps have been taken towards inclusion? To be very honest we do not have

satisfactory/convincing logic behind it. We are unable to convince the teachers, parents, community and other stakeholders. This demands training on building the capacity of SSA functionaries at various levels. Starting from teacher's upto the functionaries of state project office, we have the provision of recurrent training for teachers only. But what about the trainers, master trainers, executives, officials etc.? Are they adequately trained? Do they have clear idea and concept on the philosophy of inclusion and inclusive education? What provision does the Govt. have to train them?

- **Early Childhood Care and Development.**

It is necessary for every grassroot level functionary (anganwadi workers, parents, VECs) to understand that the first five years constitute the most crucial period for every child. During this period the child learns the most. It is essential to attend to the needs of the child and transact them in desired direction. It controls the process of learning at the later stage. It is essential to provide guidance to anganwadi workers on different aspects of development and the development of skills, to carry out simple intervention strategies to develop inclusive set up at the early stage of children's life. Accordingly it is the parents (particularly mothers), the community and VEC members who need to pay more and more attention towards this aspect for integral development of children.

- **Educational Input (Teaching Strategies)**

Techniques of Classroom management to develop appropriate teaching-learning strategies (formal and informal), assessing the level of learning of children, developing and using teaching aids are the essential aspects of effective classroom transaction. Besides curricular aspects, Inclusive co-curricular events need to be selected and organized to include all children including those with special needs.

- **Barriers to Attitude**

Lack of awareness is the result of the development of conservative and ill attitude towards the education of children with special needs. Active involvement of community leads to the success of any intervention. Sensitisation of community involves identifying the key persons in the community, and development and implementation of strategies for achieving the target. Another important aspect of the success of inclusion is the involvement of mothers. Therefore, it is time to organize a movement through mahila mandal/mahila samikhyा yojana in each and every village.

- **Inclusive Ethos Within Schools**

So as to handle the education of children with special needs in a regular classroom, it is essential to recognize and respect the potentialities of all children first. The CWSN not only required an access to regular school for sharing the space with normal counterparts, but also like their peers share the common wealth of school and its culture. Inclusion means inviting all children to come in. It is essential to bring a change in social climate to foster the development of CWSN. School must be in a position to provide

'equality in difference'. It implies that all children must be treated as equals but not necessarily in the same way. Hence it is said that it is the school where diverse needs among the children can be recognized and available resources can be utilized to meet those needs. Schools must strive to maintain equalities which are considered to be ideal inclusion.

CONCLUSION

The present piece of work is an attempt to and implement inclusive education programme for empowering special target group of the society. It aims at offering a better quality of life to the children with special needs of our society in 21st Century i.e. in the age of information technology and globalisation. Inclusive education scheme itself is a mission and challenge for the professions to tap the hidden talents and potentialities buried in the children with special needs. It can develop confidence, sense of freedom, self respect and dignity to stand on their own leg as well as enabling them to contribute their service to the society and nation. If education for all (EFA) in case of children with special needs becomes a reality, inclusive education needs to be nurtured.

REFERENCES

- Puri, M and Abraham, A. (2004). Handbook of Inclusive Education for Educators, Administrators, and planners. Sage Publications, New Delhi.
- Hegarty, S. and Alur M. (2005). Education and Children with Special Needs, Sage Publications, New Delhi.
- Disability Status in India (2003). Rehabilitation Council of India, New Delhi.
- National Curriculum Framework Review (2005) National Council of Educational Research and Training.
- Beyond Tokenism (2002) :A Guide book for Teachers, National Trust, New Delhi.
- National and International Commitments towards Establishing the Rights and Privileges of Persons with Disabilities (2005): National Forum of Organisations working with the Disabled (NFOWD), Bangladesh.

EDUCATION OF CHILDREN WITH SPECIAL NEEDS POLICY VS PRACTICE A STATISTICAL ANALYSIS

Sh. K. Ramu

Abstract

The present status of education of the children with special needs (CWSN) is discussed in detail. Relevant statistics have been gathered and analyzed to facilitate this discussion. The total population as against the population of the Children With Special Needs, the availability of the services to meet the need of the Special Children are discussed based on the data available. The paper intends to quantify the present scenario to have a scientific basis to plan for the future. The strengths of Sarva Shiksha Abhiyan (SSA) are discussed in detail. The population of the Children With Special Needs is compared with the educational provisions that are available. The integrated education, its merits and the limitations are discussed briefly. The need for the special school system to function as an integral component of the services of the education of the children with special needs is stressed. Comparison of growth pattern of education of children with disabilities with their normal Counterparts, emergence and growth of Educational institutions and educational practices and definitions of popular terms for conceptual clarity are dealt with.

INTRODUCTION

Education for all in the elementary education is a constitutional mandate. Article 45 of the constitution of India commits to ensure free and compulsory education for all children up to the age of 14 years. Further, article 41 emphasizes right to education for persons including those with disabilities. Under the constitution, persons with disabilities have been guaranteed the Fundamental Rights as available to other citizens of the country viz., equality of opportunity, non discrimination, untouchability, right to the language, script or culture, right to franchise, right to property, right to enjoy fundamental rights, access to education in any educational institution, and right to work. Of over 1000 million population in the country, 200 million are the children in the 6-14 years age group. Approximately 1.20 million are children with special needs (about 6 percent).

Biwako Millennium Framework (2002) for Action towards inclusive, barrier-free and rights based society for persons with disabilities in Asia and Pacific was adopted in the 58th session at Resolution 58/4, 2002 in Japan. The resolution proclaimed extension of the Asia and Pacific Decade of CWSN Persons 1993-2002, for another decade, 2003-2012.

A majority of the CWSN children are out of school. A study conducted by the district primary education programmes (DPEP) shows that only a million of these children are attending school (10 per cent). These children are fortunate but what about the remaining 11 million who are left out. Cent percent literacy can be realized only when all Children with Special Needs are brought under educational programmes.

Historically, India had been an inclusive society. Persons with disabilities were always part of the society. The origin of special education in India can be traced back to the era of "Gurukula" education which adhered to fundamental educational principles of special education like determining the strengths and needs of each pupil, individualization of teaching targets and methods to match the skills and interests and preparing the pupils for meeting the social expectation of their prospective interests. Though the learners were not labeled as Children With Special Needs, they were provided assistance on the basis of their individual needs.

Education of persons with disabilities did not have a special focus until recent years. India, crossing a billion populations has about 200 million school-aged children, among whom nearly 4 million children require special needs education. A startling figure indicated in the seminar on special education, at the Asia Pacific programme of education and information development Japan (November 6-10, 2000) states that only 5 per cent of children with disabilities are enrolled in schools. Moreover, 14% of children with disabilities do not complete 5 years of basic education and 20% of children with disabilities are found to be not completing the further 3 years of compulsory education. Children with disabilities in rural areas do not have access to special educational services, as most of the services are concentrated in urban areas.

The existing programmes for the Children With Special Needs in the country are special schools, integrated education programmes and inclusive education. Special school concept is more than a century old. Integrated education has been wide spread since 1974 after the centrally sponsored Integrated Education for the Disabled Children scheme. Inclusive schooling gets momentum recently after Salamanca declaration (1994) wherein India is one of the signatory bodies. With all these educational provisions, we are not able to systematize education for all children with disabilities. The latest national movement called Sarva Shiksha Abhiyan (SSA) includes disability component also for its service delivery.

The development in special education over the years has been slow but steady. Before 1900, voluntary efforts and missionaries mostly managed institutions for persons with disabilities. The charity approach was predominant during those days. After independence in 1947 the human

rights approach started gaining ground and provision for services to persons with disabilities found place in the constitution itself. Special education approach was considered to be the most effective strategy. As a result, a number of special schools emerged. The Governments started committing to education of persons with disabilities thereby starting special schools in various states and also in districts. Even today, special schools are increasing in number and this approach will remain as one of the models to serve persons with disabilities, especially to meet the needs of children with severe and profound disabilities.

NEED FOR THE STUDY

Reports on disabilities in India reveal different statistics. The report of the national sample survey organization (NSSO- 2002) reveals that the number of CWSN persons is estimated to be 18. 53million, constituting about 1.8 percent of the total population (CWSN persons in India, 2002). The report also projects that about 10. 63 percent of persons with disabilities have more than one type of disability. Among the different disabilities, prevalence of loco motor disability is the highest followed by visual disability and hearing disability. Though this data is the most recent one, organizations across the country have been using different statistics available from various sources.

Rehabilitation Council of India (RCI,1996) estimated that there would be 8.94 million children with loco motor disability, 3.24 million children with hearing impairment, 1.96 million children with speech defects, 9.00 million children with mental retardation, 4.01million children with visual impairment, and 3.00 million children with cerebral palsy in the age group 5- 14 years in India.

The figures indicate that there is a need for systematic attempt to educate the children with disabilities. As such, the pattern of growth in general education has been slow in the country. Enrolment of students without disabilities has increased in the past two decades due to the focused effort of the Government through projects like District primary education programme (DPEP) and schemes to achieve universalization of primary education. Although a plethora of archives are found in general education, less effort has been made in documenting the educational status of children with disabilities. The present study is focused on stock taking of educational programmes for children with disabilities, being practiced through various non-government and government organizations.

India is facing the uphill task of bringing the vast majority of children with disabilities under the umbrella of education as the present coverage of persons with disabilities under any form of service is reported to be a dismal 5to 10 percent. The education of persons with disabilities in the country is more than 100 years old, but the quantity of services has not substantially increased. In addition to the quantitative issue, the quality in providing services is also being debated at all levels. An attempt is made here to address the issue of present educational status of children with disabilities in India. Besides looking at the general status of educational services for

children with disabilities, the study also addressed specific issues such as education of girl children with disabilities and content specific models in education of children with disabilities.

OBJECTIVES

- To analyze the educational status of children with disabilities in India.
- To discuss content specific practices in education of children with disabilities in India.
- To mould the existing practice to a better shape.

METHODOLOGY

In order to gather information to address the objectives of the study, the questionnaires were employed eliciting information on demographic information, good practices and human resource development issues relating to education of children with disabilities. Various ministries implementing programmes for persons with disabilities, such as office of the chief commissioner for persons with disabilities, state governments, state commissioners for the persons with disabilities and non-government organizations (NGOs) were visited and information was gathered. The existing literature, reports and websites, were also used to gather additional information for effective documentation.

The general framework of the study included analysis of

- Current status of education of children in India.
- Comparison of growth pattern of education of children with disabilities with their normal counterparts.
- Emergence and growth of Educational institutions and educational practices.
- Enrolment and retention levels, role of general education and special education in increasing enrolment and retention of children with special needs in schools.
- Role of educational practices such as integrated and inclusive schools, special schools and home based training.
- Policies and funding in special education.

The results are reported so as to help frame guidelines for education of children with disabilities in the country.

PRESENT STATUS OF DISABILITY IN INDIA

The Registrar General and Census Commissioner of India J. K. Banthia in New Delhi has released the first report on disability, based on the 2001 census, on August 10th this year. According to the report almost 21 million people in the country suffer from some physical or mental disability that falls into five broad categories- seeing, speech, hearing, movement and cognitive impairments. This is 2.43 % of the country's total population. Of

them, nearly half, (49%) have varying degrees of visual disability. Despite the large availability of medical facilities in cities, the rural urban scene is not very different.

The data also indicates greater willingness amongst people to talk about disability, as compared to earlier years when the identity of a CWSN (family member) was concealed, as it was regarded a social stigma. However, the fact that having a CWSN, family member need not be a burden has still to be emphasized. To this end, the census authorities, both at the center and in the states, have stepped up efforts through multi-media campaigns. Further, as per the data, Sikkim, Arunachal Pradesh and Jammu & Kashmir have the highest incidence of disability- again visual impairment taking the lead while at the low end are Manipur, Meghalaya, Maharashtra and Goa.

The following findings are based on the census 2001.

- *Population of the Children With Special Needs*

A total number of 21, 906, 769 of which 12, 605, 635 were males and 9,301, 134 females were reported having various types of disabilities, thus 2.13 per cent of the country's population has been reported to have some kind of disability. The percentage of CWSN males to the total males in the country is 2.37 per cent and it is 1.87 per cent in the case of females. The scenario was not different in rural and urban areas (2.47 per cent vs. 1.93 and 2.12 per cent vs. 1.71).

- *Disability Rate*

The disability rate for every one-lakh population in the country as reported in census 2001 is 2, 130. In the rural areas, 2, 207 persons per one lakh population have been reported as having one or the other type of disability whereas in urban areas this rate has been reported to be 1,929. Among the various types of disabilities reported, the highest disability rate of 1,060 has been recorded from rural areas in the case of persons suffering from the disability "in seeing" while the category of disability in hearing recorded the lowest disability rate of 1.38 in rural areas. An identical pattern of disability rate was recorded in the urban areas.

- *Prevalence of disability by type*

Disability in seeing emerged as the single largest category that accounted for 10,634,881 Children With Special Needs population or 48.6% of the Children With Special Needs population. Rest of the categories together account for the remaining 51.4% of the total Children With Special Needs population. The Children With Special Needs population by type of disability and sex with the proportion to the total Children With Special Needs population in India is shown below.

The Children with Special Needs Population Distribution

Type of Disability	Persons	Males	Females
<i>In Seeing</i>	10,634,881 48.6%	5,732,338 45.5%	4,902,543 52.7%
<i>In Speech</i>	1,640,868 7.5%	942,095 7.5%	698,773 7.5%
<i>In hearing</i>	1,261,722 5.8%	673,797 5.4%	587,925 6.3%
<i>In Movement</i>	6,105,477 27.9%	3,902,752 31.0%	2,202,725 23.7%
<i>Mental Retardation</i>	2,263,821 10.3%	1,354,653 10.8%	909,168 9.8%

- *Literates among the Children With Special Needs*

Forty nine point three percent or 10,801,232 of the CWSN population were reported to be literate as against 11,105,537 (50.7%) illiterates. The literates among males were 7,330,091 (58.1%) whereas this figure for females was only 3,471,141, nearly half of the males. The percentage of male literates was highest 65.44% in the category of seeing disability. In speech an identical pattern was recorded in the case of female literates

- *Workers and non-workers*

Out of total Children With Special Needs, 34.5% (7,556,049) persons were reported to be workers of whom 5,646,609 were males and 1,907,440 were females. 14,350,720 or 65.5% Children With Special Needs were non-workers. The proportion of male workers and non-workers worked out to be 44.8 and 55.2% respectively. Only 20.5% female Children With Special Needs were reported to be workers and the remaining were non-workers. Maximum numbers of workers (39.9%) were reported in the category of seeing disability whereas the least proportion of 12.5% workers was reported in the category of "mental" disability among females.

- *Status of the states*

The child population in the age group 0-6 years for 2001 was 157.86 million with boys accounting for 51.88% of the population and girls constituting 48.12%. Uttar Pradesh (19.3%) stands high in child population along the states followed by Bihar (10.3%), Maharashtra (8.35%), West Bengal (7.05%), Madhya Pradesh (6.13%), Rajasthan (6.62%), and Andhra Pradesh (6.13%). Northeastern states have less child population when compared to other parts of the

Country. In all the states, male child population exceeds 50 percent, which was higher than that of the female child population (Census, 2001).

Approximately 6% of persons with disabilities belong to the age group of 0-14 years in rural areas and 5.4% in urban areas. In the case of number of persons with mental retardation, the NSSO (2002) survey reveals a low number, though many other reports present a high percentage of persons with mental retardation. As children with mental retardation do not always have visible characteristic, it is possible that child with mild mental retardation were not covered in the NSSO 2002 survey and some of them would have been missed out. In addition, perception of mental retardation by enumerators and informants also is a major factor in including or excluding such persons in the enumeration.

Status of Educational Services for Children with Disabilities in India

Educational provisions for children with special needs

The objective of service sector in any country is to provide effective services for persons with disabilities and the process can be achieved through many strategies. Each strategy has its own advantages and limitations. The relative merits of each strategy should be seen in the context of the nature of CWSN children and the type of services required by them. Some of the most commonly used strategies to serve Children With Special Needs persons are enumerated as follows:

Special Schools

Special School concept is an accepted model of education for children with disabilities throughout the world. As of today, more than 3000 special schools for the CWSN children are functioning in India. Among them, approximately 900 are institutions for hearing impaired children, 400 for children with visual impairment, 1000 for mentally retarded, and the remaining 700 for children with other physical disabilities.

In most of the special schools in India, the curriculum followed is similar to the one prescribed for non-CWSN children of the same age group. However, some exemptions are made with regard to specific disability areas. For example, schools for visually impaired children exempt visual oriented concepts in mathematics and science. Music, recreation activities, and pre-vocational skills are taught to the children in special schools in addition to the curricular skills. Children with hearing impairment are exempted from learning the language since communication is the major problem for them. Children with locomotor disabilities are provided better access to the learning environment. Though specific learning tasks are prescribed in special schools, children always show their true capabilities in learning. Children with disabilities in special schools are mostly provided hostel facilities free of cost and most of these schools are located in urban areas.

Integrated Schools

The population of children with disabilities in the school going age group, as per the RCI's manpower document is as follows:

Visually impaired	- 0.12 million
Hearing impaired	- 0.65 million
Mentally retarded	- 3.61 million
Loco motor Handicapped	- 3.39 million

Though the population is huge, the coverage of these children in special school setting is rather low. Integrated education emerged out of compulsion rather than option. The implementation of integrated education programme is addressing the needs of the high-risk children who are suspected to be potential dropouts and therefore, retention of such children is becoming high. Integration of children with disabilities is reinforcing the need for better educational practices in the general school system. Most of the children currently integrated are those with locomotor disabilities. Still, there is a long way to go in realizing the objective of education for all children with disabilities.

Integrated Education does not mean just enrolling children with disabilities in regular classrooms. The children need support in terms of structural arrangements and teaching methods. Therefore, there is a need for special arrangements to assist them in general schools. Integrated education programmes are being implemented in large numbers by both governmental and non-governmental agencies in India. It is interesting to note that enrolment in secondary schools is markedly lower than in primary school. The effort towards universalisation of primary education by the Government may be a contributing factor for the trend. This trend is reported to be true with general education also.

To educate the persons with disabilities, the Government of India has launched a few programmes in co-ordination with the state governments and ministries like Ministry of Social Justice and Empowerment and Ministry of Human Resource Development.

The main achievements of IEDC are infusion of special needs in mainstream education, preparation of District Institutes of Education and Training (DIETS) to implement special needs programme; production of print and non- print material and project management information system.

Background and Definitions

There has been a very strong wave of inclusive education over the past few years. It has been prominently reflected in the national policy on education, 1986 (NPE, 1992), to integrate children with special needs with other groups with a view to enabling them to face the life with courage and confidence. The world conference on education for all, held in Jomtien,

Thailand (1990) emphasized inclusive education. Free and compulsory primary education for all children until they complete the age of fourteen years is the directive principles of Indian Constitution. Article 45 of the Constitution proclaim that, " Every child has a fundamental right to education, and must be given the opportunity to achieve and maintain an acceptable level of learning, every child has unique characteristics, interests, abilities and learning needs, educational system should be designed and educational programmes implemented to take into account the wide diversity of these characteristics and needs; those with special educational needs must have access to regular schools which should accommodate them within a childcentered pedagogy, capable of meeting these needs". The law of social integration for people with disability, No. 19. 284, Chapter II, January, 1994 established that " the public and private mainstream education centers should incorporate the necessary innovations and curricular adaptations to enable access for people with special needs, providing them with the complementary education required in order to assure them of their permanence and possess within the system".

The Persons With Disabilities Act, 1995 (PWD Act 1995) affirmed the principle of right to education in appropriate environment of the children with disabilities. The ' National curriculum Framework for School Education', 2000 of NCERT emphasized on bringing the children with special needs to inclusive schooling. In Sarva Shiksha Abhiyan, emphasis has also been given to bring such children to the common fold of education.

From the above discussion it can be said that inclusive school is a type of school where we can enroll, educate and empower all types of children irrespective of their special educational needs. We know inclusive education is a process through which each one can be educated through the common process irrespective of their special education needs.

Sarva Shiksha Abhiyan (SSA)

The Sarva Shiksha Abhiyan launched in 2002 is a historic stride towards achieving the long cherished goal of education for all in the age group of 6-14 years by 2010. It hopes to ensure that all children complete five years primary schooling by 2007; and all children complete eight years of schooling by 2010. It is a response to the demand for quality basic education all over the country to impart human capabilities to all children.

Interventions for children with special needs under sarvashiksha Strategies of SSA programme with relevance to education of the Children With Special Needs has got the following strengths

1. Institutional Reforms

SSA gives a new way to make the policies to become practices at the institutional level. The objectives of SSA are becoming a reality since the

reference is made at the institutional level. SSA opens the door to bring this reform to the doorstep of every educational institution.

2. Sustainable financing

The Sarva Shiksha Abhiyan is based on the premise that financing of elementary education interventions has to be sustainable. This calls for a long-term perspective on financial partnership between the central and the state governments. The success of any programme depends upon sustainable financing. Many of our past experiments have miserably failed because of the lack of financial partnership between central and state Governments. The effort to include the education of the Children With Special Needs naturally requires a long-term perspective on financial aspects. SSA is a great boon to bring this rare opportunity to make the central and state Governments as financial partners that ensures the sustainability of funds for this programme. No doubt no CWSN child is expected to wait any longer because the most financial crisis is taken care of by central and state Governments.

3. Community ownership

Many of our educational programmes of the past failed not because of the programme itself but it was due to the lack of involvement of the community. The SSA programme calls for community ownership of school based interventions through effective decentralization. This will be augmented by involvement of Panchayati Raj institutions; self help groups, DEACWA, DWCRA and VEC.

4. Institutional capacity building

Improvement in quality requires sustainable support of personnel. The inclusion of CWSN population in the common school system will be meaningful only if the resources satisfy the requirements of the CWSN children. It includes the trained teachers and the learning materials. The SSA conceives a major capacity building role for national and state level institutions like NIEPA/ NCERT/NCTE/SCERT/SIEMET. These institutions pave the way for sustainable support of resources for the effective capacity building of the educational programme (SSA) that requires the inclusion of CWSN population to the mainstream.

5. Improving mainstream educational administration

An effective system will require survey of what is needed followed by a micro planning to meet those needs. This is further enriched by the awareness created by and for the programme. The programme has a community based monitoring system. The educational management information system (EMSI) will correlate school level data with community-based information from micro planning and surveys. Besides this, every school will have a notice board showing all the grants received by the school and such other details.

6. Habitation as a unit of planning

Education was considered a rare commodity when it was remote. CWSN child could not have access to education when they have to travel long distance. SSA is keen in giving this commodity at their habitation. SSA works on a community based approach in planning with habitation as a unit of planning. Habitation plans will be the basis for formulation of district plans.

1. Accountability to community

Success is the result of combined efforts. No single hand gives sound. SSA envisages cooperation between teachers, parents and PRIs, as well as accountability and transparency.

2. Focus on special Groups

SSA realizes the importance of including CWSN in the common education system. This ensures the concept of education for all.

CONCLUSION

Thus SSA has been implemented with an objective of increasing the enrolment of children including those with disabilities all over the nation. It allows for enough flexibility to the local district in implementing the scheme, to follow a model suitable to the district. Inclusive education under SSA for children with special needs in Andhra Pradesh is documented here as an example. The SSA Scheme is likely to make an impact on services to children with disabilities.

Early identification and intervention is always desirable. To what extent the door-to-door survey for identification of CWSN children has been undertaken, to what extent the assessment team members have assessed the child and placed him under the category the child deserves, all these questions determine the efficacy in respect of enrolment. For example, if due to the carelessness of the primary school teachers most of the CWSN children are left untouched during door-to-door survey, then we can say that effectiveness of the survey is doubtful.

The enrolment is not the ultimate aim of the process. If the percentage of wastage and stagnation is high in case of CWSN children then we can say that the programme is defective. Successful completion of the course within the desirable time limit proves the efficacy of the programme.

As of now, a number of SSA models are being practiced and the results of the scheme can be realized after 2 to 3 years. The scheme is implemented with an optimistic vision that all the children in the age group of 6-14 years will be brought under the umbrella of education within the said period.

REFERENCES

- C.L.Kundu, Status of Disability in India, Rehabilitation of Council of India, 2000.
- NCERT, Handbook for the teachers of the Visually Handicapped, 1992
- Education for All: The Andhra Pradesh Scene, Hyderabad, SCERT, Govt. of Andhra Pradesh, 1994.

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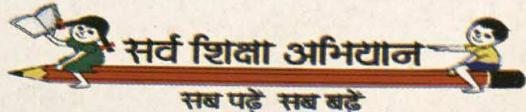
Because of the major personnel changes in the Bureau of Education (B.E.), previous notes on the training through division of the Bureau of Education, B.E., are no longer valid. All training through division of the Bureau of Education, B.E., is now conducted by the Bureau of Teacher Education, B.E. The Bureau of Teacher Education, B.E., is now in charge of all teacher training through division of the Bureau of Education, B.E.



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Distance Education Programme (DEP) is a major intervention in Sarva Shiksha Abhiyan (SSA) focusing on "strengthening training through distance learning". SSA calls for the training of a large number of teachers and other personnel to bring out qualitative improvement in elementary education. As face-to-face approach or the cascade model would be inadequate to carry out the enormous task of training and recurrent training of those associated with elementary education, DEP has been envisaged to facilitate the process. The Programme through distance education provides inputs and materials for the training and capacity building of teachers and other functionaries in curricular, contextual and pedagogical areas.

DEP-SSA has been created by the Ministry of HRD, Dept. of Elementary Education & Literacy, Govt. of India as a national center for distance education activities under SSA on 1st July, 2003 and implemented by IGNOU, New Delhi in all the States and UTs of the country. It provides technical support to the states enabling them to adopt distance education as an integral part of SSA. It aims at imparting need-based, local specific in-service training for teachers and other functionaries directly involved in elementary education programme.

**Distance Education Programme -
Sarva Shiksha Abhiyan (DEP-SSA)**

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